

National Study on Violence against Children in Georgia

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The International Society for Prevention of Child Abuse and Neglect (ISPCAN), founded in 1977, is the only multidisciplinary international organisation that brings together a worldwide cross-section of committed professionals to work towards the prevention and treatment of child abuse, neglect and exploitation globally. ISPCAN's Mission is "to support individuals and organisations working to protect children from abuse and neglect worldwide".

The roles and responsibilities of the research team members are outlined in Appendix 1.

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Foreword

The Global Report on the United Nations Secretary-General's Study on Violence against Children brought to the attention of the whole world the high scale of all forms of violence against children. It encouraged and recommended countries to undertake further research and analysis on the magnitude of violence against children. The Study on Violence against Children in Georgia commissioned by UNICEF in collaboration with local governmental and non-governmental sectors and the International Society for the Prevention of Abuse and Neglect (ISPCAN) is therefore the result of these recommendations.

The National Study on Violence against Children describes the scale of child abuse and neglect in families, schools, residential settings for children deprived of parental care, and collective centres for internally displaced persons throughout Georgia. It illustrates the experience of Georgian children living through violence and it provides directions for preventing violence and protecting children from its consequences.

The Study reveals that the incidence of violence against children in Georgia is as high as all studied settings in Europe and in other countries where the same tool has been used. Overall, in the year 2007 approximately 80% of boys and girls in Georgia suffered from some form of physical and psychological violence (79.8% and 82.3% for physical and psychological violence). While the most common forms of reported physical punishments may not be considered severe (smacking on the bottom with a hand, pulling hair and twisting ears), there are instances of more severe forms. The most common psychological punishments are yelling, calling derisory names and cursing the child. There are also instances noted of positive discipline approaches, which need to be built upon and strengthened.

Both Global and National studies published in Georgian and English, provide a strong basis for the development of policies aimed to protect children from violence and to prevent all forms of violence against children, raise public awareness, and train professionals working with children to take appropriate action. Both studies will guide the State and other entities to implement the Convention on the Rights of the Child.

UNICEF Georgia acknowledges and thanks children and their parents, as well as many organizations participating in this study, namely the Ministry of Education and Science, Ministry of Refugees and Accommodation, ISPCAN, Public Health and Medicine Development Fund, and BCG Research. The commitment and dedication of local and international experts - Margaret A. Lynch, Lia Saralidze, Adam Zolotor, Desmond Runyan, Christopher Gittins – were highly appreciated.

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Acronyms used in the Study

CAN	Child Abuse and Neglect
CAP	Country Action Plan
CEE	Central and Eastern Europe
CIS	Commonwealth of Independent States
CRC	Convention on the Rights of the Child
BCG	Business Consulting Group (Research Organisation)
HBSC	Health Behaviour in School-aged Children (WHO)
IDP	Internally Displaced Person
ICAST	ISPCAN Child Abuse Screening Tools
ICAST P	ISPCAN Child Abuse Screening Tool - Parent
ICAST C H	ISPCAN Child Abuse Screening Tool – Child: Home
ICAST C I	ISPCAN Child Abuse Screening Tool – Child: Institution (School, Workplace etc)
ISPCAN	International Society for prevention of Child Abuse and Neglect
MICS	Multiple Indicator Cluster Survey
MoES	Ministry of Education and Science
MONEE	MONitoring Eastern Europe. (Project officially called “Public Policies and Social Conditions: Monitoring the Transition in Central and Eastern Europe and the Commonwealth of Independent States”)
NGO	Non Government Organisation
PHMDF(G)	Public Health and Medicine Development Fund (of Georgia)
SPSS	Statistical Package for the Social Sciences
UNICEF	United Nations International Children’s Fund
WHO	World Health Organisation

Executive Summary

Introduction

In 2007, UNICEF, in collaboration with the Governmental and non-governmental sectors, commissioned the National Study on Violence against Children in Georgia. The main aim of the study was to gain an understanding of the extent and nature of violence experienced by children in Georgia. The publication of the United Nations Secretary-General's Study on Violence against Children in 2006 drew attention to the extent of violence against children world wide. The UN Study also encouraged countries to undertake further research and analysis on the magnitude and nature of violence against children, and to use the findings to facilitate the development of country wide plans to prevent and respond to all forms of violence against children. Consequently, a National Study on Violence against Children can be seen as a valuable first step in this process.

The National Study in Georgia was conducted in two phases. The first phase was conducted between September and December 2007 and addressed children's experiences of violence in the home and in social care residential institutions. The second phase, from December to early March 2008, extended the study to violence in schools.

Aims of the Study

The overall aims of both phases of the study were to identify within Georgia:

- The extent of violence (including child abuse and neglect) against children (from birth to 18th birthday);
- The pattern of violence;
- Factors associated with violence;
- The extent and type of response needed to prevent violence, child abuse and neglect.

The study was designed to provide data that could be used to develop national violence prevention policies. Outputs from the first phase were also needed to inform planning of services for the recognition and management of child abuse and neglect. The second phase aimed to provide information to the Ministry of Education and Science (MoES) who, supported by UNICEF, had already commenced working on a Safe School Initiative.

Target Groups

First Phase

- 1650 children from birth to 10 (up to 11th birthday). This included 1100 children selected from the general population and 550 from large Collective Centres for Internally Displaced Persons.
- 1050 children aged 11 to 17 years (up to 18th birthday) and living at home. This included 700 from the general population and 350 living in Collective Centres.
- 301 children aged 11 to 17 living in Social Care Residential Institutions.

Second Phase

- 1300 children aged 11 to 17 years from 93 schools.

The sampling methodology was designed to provide nationwide representative samples of the target groups. For children under 11 years of age, it was the child's primary carer (usually the mother) who was interviewed, while for children aged eleven years and over it was the child who was to be interviewed.

Research Instruments

The main research instruments used in both phases of the study were the ISPCAN Child Abuse Screening Tools (ICAST). These are internationally validated research tools developed in response to the UN Study's call for a set of common instruments to be used to assess child victimization in a multi-national, cultural, and linguistic context.

These instruments use structured interviews which focus on acts experienced by children that were agreed by the scientists to be common or serious. While the tools do not include a definition of abuse, many if not all of the actions included can be described as distressing or degrading for a child. They include versions for use with carers and with children over eleven. For use in Georgia the instruments (questionnaires and manuals) were translated into Georgian and back translated into English to ensure accurate interpretation.

The Parents questionnaire (ICAST P) provided information about both the respondent's and any other carer's use of physical and psychological punishment towards an index child, as well as their view on that child's experience of neglect and sexual abuse. Parents were also asked about the use of positive methods of discipline and, in an open question, for their ideas on successful methods.

The questionnaire designed for children aged over 11 years and living at home (ICAST CH) asked about their experiences of exposure to violence in the home or near by, and experiences of direct physical and psychological violence, sexual abuse and neglect. They were also asked to indicate whether the perpetrator was an adult or another child. Additional open questions also allowed them to share their views on violence against children and ways to prevent it.

The children living in institutions (ICAST CI) were asked about their experiences of physical, psychological or sexual violence directed towards them by an adult or other child within the Institution. They were also asked about their experiences of neglect while living in the institution.

For the school study the same ICAST instrument was used as had been used for the children in institutions. In order to better inform the MoES Safe School Initiative, two additional pages of questions on school climate, attitudes, location, and time of bullying and violence were added. This was intended not only to assess such practical aspects of school violence such as common times and locations of bullying but also to give a more general sense of children's attitudes to school. The questions used were based on the World Health Organisations Behaviour Survey for School - aged Children; another internationally validated instrument.

Basic demographic data such as age, gender and location was collected for all the target groups.

Findings

The findings need to be viewed against the high incidence of violence against children revealed by the UN Study. The indications suggest that the rates of violence within Georgia are within the ranges to be found elsewhere in Europe and among countries where the ICAST research tool has been piloted.

Carer's Reports (total 1650)

The respondents (mainly mothers) reported for themselves and for other carers in regular contact with the index child (aged 0-10). A wide range of other carers were involved, mainly fathers and grandparents.

The reports show that almost all parents (90.8%) are using some positive management methods. Despite this, they also use a range of physical and psychological punishments when disciplining their children. Overall, in the year prior to the study, parents admitted to subjecting 79.8% of the children to physical discipline and 82.3% to psychological punishments. There were no statistically significant differences between the treatment of boys and girls.

There were no significant differences between the two groups of parents (general population and IDP) in their use of physical and psychological punishments. The IDPs had been included because of concern that difficult living circumstances increased the vulnerability of the children. This does not seem to have affected the parent's approach to discipline.

Parents living in rural areas reported significantly higher rates of physical and psychological punishments in comparison to their urban counterparts.

Both physical and psychological punishments were found to start at an early age. Nineteen per cent of children aged one year or under were physically disciplined rising to 90% of four to seven year olds. Psychological punishments followed a similar pattern.

The most common reported physical punishments were smacking on the bottom with a hand (51.7%), shaking (46.1%), pulling hair (43.7%), and twisting ears (43.8%), while the most common forms of psychological punishment were yelling (75.1%), calling the child derisory names (31.2%) and cursing the child (29.8%) or threatening to abandon the child (27.4%).

While some may consider the examples above to be mild or moderate discipline most if not all could be considered to be cruel and degrading; treatment that the Convention on the Rights of the Child seeks to abolish. Of particular concern is that just over a fifth of respondents (21.5%) reported they had repeatedly hit the child (beat him/her up). Eight respondents admitted trying to choke or suffocate the child and 6 burning him/her. Such actions, especially if repeated might legitimately be considered to come within a definition of child abuse. However without a mechanism to detect, refer and assess such cases abuse within the general population they are likely to go undetected and unrecorded.

The respondents considered 20.8% of the children had suffered neglect (failed to have one or more basic needs met). While this included 5.2% who had suffered preventable serious accidents, in the main the neglect was not the result of parental omission. There were no statistically significant differences between the reports from the general population and IDP parents. Rates for reports of neglect were significantly higher for rural children.

Only 0.3% of the children were reported to have suffered from any form of sexually abuse. However, it was felt that this questionnaire was unlikely to give an accurate picture of sexual abuse.

Children's Reports of Experiences in the Home (total 1050)

Most of the children were living with both parents and had siblings. In addition to experiences in which the children were directly involved, they were asked about exposure to violence within the home and in the immediate neighbourhood. Such exposure was reported by 28.6% of the children. There were no significant differences between the general population children and IDP children. While the most common reports for the last year were of adults yelling and shouting at

each other in a frightening way (15.5%), only 2.3% reported physical violence between adults in the home. Thus, in this respect the majority parents are providing a positive role model to their children.

Fifty-four percent (54%) of all the children reported that they had experienced direct physical violence in the home and 59.1% had suffered psychological violence. Over the last year there were no statistically significant differences between the general population children and the IDP children but, when looking back beyond the last year, the IDP children reported higher rates of physical and psychological violence with differences for physical violence reaching significance.

Boys reported significantly more psychological violence than girls and physical victimisation was found to decrease with age. The higher rates of physical and psychological violence reported by rural parents were not mirrored by the reports from rural children.

As with carer reports, twisting of ears and pulling of hair featured frequently as did spanking (smacking) with a hand. The most common examples of psychological violence were screaming at the child, insulting them or embarrassing them.

For both physical and psychological violence an adult was more likely to be the perpetrator but there were sufficient reports of violence perpetrated by another child to raise concerns about peer violence in the home. In addition, 17.9% of the children reported bullying by another child in the past year

Almost a quarter of the children considered themselves to have had one or more basic needs neglected in the last year. There were no differences between the general population and IDPs, however, more neglect was reported by both regional and rural children.

A total of 95 (9%) of children reported some form of sexual abuse happening in the home. This rate is within the range found by other research in Europe. While the majority of incidents involved another child or young person, adults were reported as having sexually abused 27 of the children. The IDP group reported significantly less sexual abuse while rural children reported significantly more.

Experiences of Children Living in Institutions (total 301)

Most of the children reported that they felt safe in the institution but at the same time 71.1% reported physical violence and 61.5% psychological violence in the last year. There were no statistically differences between boys and girls but, as with children living at home, physical violence decreased with age. In contrast to children reporting on experiences in the home, children in the institution most commonly identified another child as the instigator of the violence. However, some adults were clearly using both physical and psychological punishments to discipline the children including occasionally techniques that could cause injury to a child. Adults were also reported as using derogatory names and shouting and swearing at the children in their care.

A third of the children considered they had suffered neglect since coming to live in the institution with significantly more girls (38.6%) than boys (26.3%) reporting neglect in the last year. The neglect experiences most frequently reported were those relating to lack of support or feeling unimportant.

Both boys and girls in the youngest age group studied (11-12 year olds) seemed to be particularly vulnerable, with 85.6% reporting physical violence, 68.8% psychological violence and 37.6% neglect.

Sexual abuse by another child or adult within the Institution was reported as having happened

since coming to live in the Institution by 17.3% of the children with slightly more boys reporting such abuse than girls. For the last year 16.6% of the children reported sexual abuse.

Of the 50 children reporting sexual abuse over the last year, 72% reported being abused by another child, 8.0% by an adult and 20% by both a child and an adult. The most common unwanted sexual activity was being shown pornography by another child; however, there were also examples of more serious abuses, including activities such as the removal of clothes, touching and forced sex (1 example only) involving adults.

Experiences of Children in School (total 1300)

Students' attitudes to school, including relationships between students, treatment by teachers, and position of parents were very positive and most children and young people reported feeling safe at school.

The reported levels of physical and psychological violence were very similar (47.1% and 47.5%). Sexual violence was much less commonly reported (7.3%)

Gender differences were more prominent than in the other settings included in the study; with girls experiencing less of all types of violence than boys – 36.6% of girls and 57.7% of boys reported experiencing physical violence, and 44.3% of girls and 50.7% of boys reported psychological violence. As in other settings, physical violence decreased with age but not psychological violence or sexual violence.

Violence occurred most commonly between students. However adults in the school were often cited for physical and psychological violence. The most common behaviours reported were slapping (most often by a child) and twisting the ear (by an adult). More serious violence, such as crushing fingers, cutting, choking and burning, were less common and more likely to be perpetrated by another child than an adult. It included crushing fingers, cutting, choking and burning. Psychological violence as in other settings commonly involved shouting and swearing at the child often by an adult.

The vast majority of perpetrators for all types of sexual violence were other children, with the showing of pornography and unwanted kissing being the most common victimizing behaviours. Very few adults were implicated in sexually inappropriate behaviour, which can be seen as a positive finding in relation to violence within schools.

Violence between students was most likely to occur in school play areas and on the way to and from school.

Comparison Between Study Settings

The children shared their experiences of violence in three settings: the home, residential institutions and schools. The ICAST questionnaires used for children's experiences in these three settings obtained information on the same categories of violence but there were some differences in the individual questions asked. Despite these minor differences, it would seem legitimate to compare the experiences of children's experiences in the three settings

When the experiences of the children living in Institutions were compared with those living at home in the community, the children in the institutions had reported significantly higher rates of physical and sexual abuse and neglect. When experiences were compared between home and school, children reported experiencing more physical and psychological violence at home than they do in school.

Children's Views

The children were given an opportunity in an open ended question to express views on violence prevention. In the course of the interview some children had already denounced the use of beating and corporal punishment. They were clear that adults have a responsibility to protect them from violence and to provide attention, supervision, guidance and when necessary discipline. They wished their rights to be respected and viewed the law as having a role to play in both protecting them and punishing perpetrators. They wanted parents to receive guidance in rearing children and all adults training on how to treat children. Within schools, they wanted education for both themselves and teachers on how to raise awareness about violence and how it can be reduced.

Conclusion and Recommendations

Children in Georgia have been shown to be experiencing high levels of violence in all the settings studied. The use of physical and psychological punishment starts in the home at an early age, and occurs despite an apparent willingness of parents to use positive management techniques in rearing their children. For the older children it is clear that in addition to ongoing violent discipline, by adults in their homes, peer violence is occurring. Within both residential institutions and schools, while peer violence is justifiably seen as the major issue, attention should also be paid to the use of physical and psychological violence perpetrated by adults working in the institutions and schools.

While focussing on a range of violent behaviours the study has demonstrated that in all the settings studied there are examples of severe and serious actions that warrant referral for assessment of possible child abuse. These actions do not necessarily involve children already identified as vulnerable.

In responding to the study findings it will be important to build on identified strengths and on the welfare reforms already underway. Two interrelated themes dominate the recommendations; violence reduction and development of a response to child abuse and neglect.

Reduction of violence will require an attitudinal shift in society away from an acceptance of violence against children. More specifically education of the public, families, children and professionals is needed. Legislation may be required to ensure the Government of Georgia's commitment to prohibition of physical punishment becomes a reality.

Institutions and schools need to develop policies and strategies to reduce violence and make such settings safe for children. The Safe Schools Initiative of the MoES is an example of such a development.

Responding to child abuse and neglect requires a coordinated approach, agreed across sectors, which includes a clear process of referral and assessment of suspected cases. The process must be accessible to all; children and families as well as professionals and the public. The development of a referral and assessment system must be supported by training and service development.

Chapter One: Introduction

In 2007, UNICEF, in collaboration with the Governmental and non-governmental sectors, commissioned the National Study on Violence against Children. The main aim of the study was to learn the extent and nature of violence experienced by children in Georgia. The first phase of the study from September to December 2007 addressed violence, abuse and neglect of children within families and within Social Care Residential Institutions. The families were recruited from the general population and from Collective Centres for Internally Displaced Persons (IDPs)¹. Thus children living in “ordinary” families in the community were included as well as children already identified as vulnerable. A second phase from December to early March 2008 extended the study to violence within schools.

Both phases were designed to produce data which could be used to develop violence prevention policies. Outputs from the first phase were also needed to inform the planning of services for the recognition and management of child abuse and neglect. The second phase was planned to provide information to the Ministry of Education and Science (MoES) who, supported by UNICEF, had already started work on the Safe School Initiative.

For the purpose of the assessment violence included physical, sexual, emotional violence, and neglect of children between the ages of 0 -18 (up to 18th birthday). For children less than 11 years of age parents or other primary carers were interviewed, while children aged eleven years or older reported on their own experiences of violence perpetrated by an adult or another child.

The first chapter of this report sets the scene for the study by briefly reviewing information available on violence against children, internationally and within Georgia. A very brief summary of recent and current child welfare reform in Georgia is included as are the backgrounds to the development of the main research tools (the ISPCAN Child Abuse Screening Tools – ICAST and School Climate Assessment).

An overview of the study methods, research tools and field work is found in Chapter Two with additional details in the Annexes.

The findings are presented in four separate chapters covering reports by carers, children’s experiences in the home, children’s experiences in residential institutions and children’s experiences in school. A separate chapter describes children’s suggestions and views obtained in response to open ended interview questions. Recommendations are made throughout the report where each recommendation is related to the evidence provided by the findings of the study. A final chapter presents and discusses an overview of the findings and draws together the recommendations under the two main themes of violence reduction and responding to child abuse and neglect.

Background

Violence against children has always existed regardless of country and historical period but controversy and taboos have often resulted in its true extent being denied. This has meant that in

¹ When Georgia gained independence during the break up of the Soviet Union in 1991 violent fighting and unilateral declarations of independence by South Ossetia in 1991 and Abkhazia in 1992-4 resulted in an estimated 360,000 persons being internally displaced. Currently, more than 25,000 children (almost half of all internally displaced children living in Georgia) continue to live in dilapidated so called “collective centres.” The centres are former public buildings, such as hostels, hotels, shops, and kindergartens and were offered by the state as shelters to IDPs 15 years ago.

many countries there has been no public debate or acknowledgement of the problem and no call from civil society for governments to develop comprehensive child protection laws, services and systems. The publication of the United Nations Secretary-General's Study on Violence against Children in 2006 (hereafter referred to as the UN Study) provided an opportunity to address this gross infringement of the child's right to protection from abuse, by bringing to the attention of the whole world the high rates of violence suffered by girls and boys. Consequently, child abuse and neglect is being increasingly recognised as a global problem with serious health, social and economic consequences. Perpetrators are known to include parents, family members, teachers, caregivers, law enforcement authorities and other children.

Existing data suggests that the abuse and neglect of children is at epidemic proportions and that no community or society is immune. Furthermore the limited data from less developed countries, without the infrastructure to recognise and intervene, suggests the global problem is greater than the data presented from developed countries has implied (UN Study, Krug et al 2002, ISPCAN World Perspectives 2006). The UN Study recommends that countries undertake further research and analysis on the magnitude and nature of violence against children in order to develop country-wide monitoring systems and programmes to combat all forms of violence against children. Data collected by such studies can be used to inform decision and policy-makers as well as educators. It can also be used to drive public awareness campaigns and to guide service development. Thus a national survey on violence against children can be seen as a valuable first step in responding to the recommendations of the UN Study. The other main recommendations, as summarised and endorsed by the international NGO Advisory Panel of experts (including children and youth), of the study were:

- Prohibiting all forms of violence, including all corporal punishment, harmful traditional practices and sexual violence against children in all settings by 2009;
- Developing a multifaceted, coordinated and integrated national plan of action to respond to violence against children by 2007;
- Involving children and young people in a follow-up to the Study;
- Strengthening national efforts to prevent violence against children through child-friendly policies and services, public information campaigns, and the provision of training for all persons working with children;
- Ensuring that children have access to quality health, social and legal services to provide assistance in cases of violence, as well as accessible and safe complaints mechanisms;
- Ensuring that perpetrators of violence against children are held accountable and brought to justice;
- Developing effective data collection and information systems to track progress and inform policy and programming at all levels.

Violence in the Home

Collecting rates of abuse in the home is complex and nearly impossible for countries with no reporting or referral system. Rather than ask directly about physical abuse² or emotional abuse,³ the majority of studies available have collected data on methods of discipline. The World Report on Violence and Health (Krug et al 2002) gave some alarming statistics. For example, 37% of children in Egypt reported being beaten or tied up and 26% reported physical injuries (Youssef et al 1998). In Korea, two thirds of parents reported whipping their children (Hahm and Guterman 2001), and in Romania nearly half admitted beating their children regularly (Browne et al 2002).

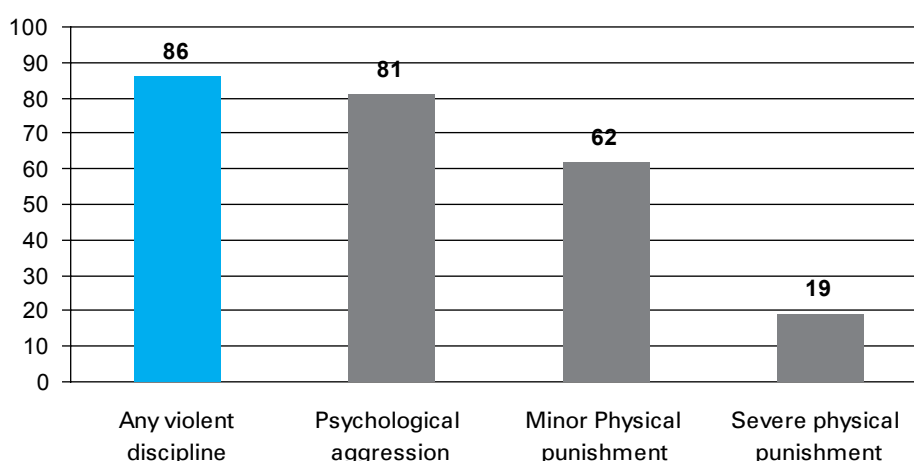
² Physical abuse is considered to be: Those acts of commission by a caretaker that cause actual physical harm or have a potential for harm (WHO 2002)

³ Emotional abuse includes acts which have an adverse effect on the emotional health and development of a child. Such acts include restricting a child's movement, denigration, ridicule, threats, and intimidation, discrimination, rejection and other non physical forms of hostile treatment (WHO 2002).

In Ethiopia, 21% of urban and 64% of rural children reported soft tissue injuries resulting from parental punishment (Ketsela and Kedebe 1997). Not quoted in the WHO Report, but equally alarming, is the research from England (Nobes and Smith 1997) showing that 35% of children in a sample of “ordinary” two parent families had received severe physical punishment defined as the intention or potential to cause injury or psychological damage.

Figure 1 shows a summary of data from the most recent (2005) Multiple Indicator Cluster Survey (MICS)⁴ (www.childinfo.org) on the use of discipline, as reported by a sample of mothers of children aged 2 - 14 from 29 countries (not including Georgia). The data relates to the month prior to the survey and includes psychological punishment as well as physical discipline. Severe physical punishment includes hitting the child on the face, head or ears, or hitting the child hard or repeatedly.

Figure 1.1 – Percentage of children (2-14) from 29 countries (CEE, Asia, Latin America and Africa) experiencing discipline by method



The MICS study also found that the proportion of mothers or caregivers who said they believed corporal punishment of children to be necessary is consistently lower than the proportion indicating their children have experienced physical punishment in the last month.

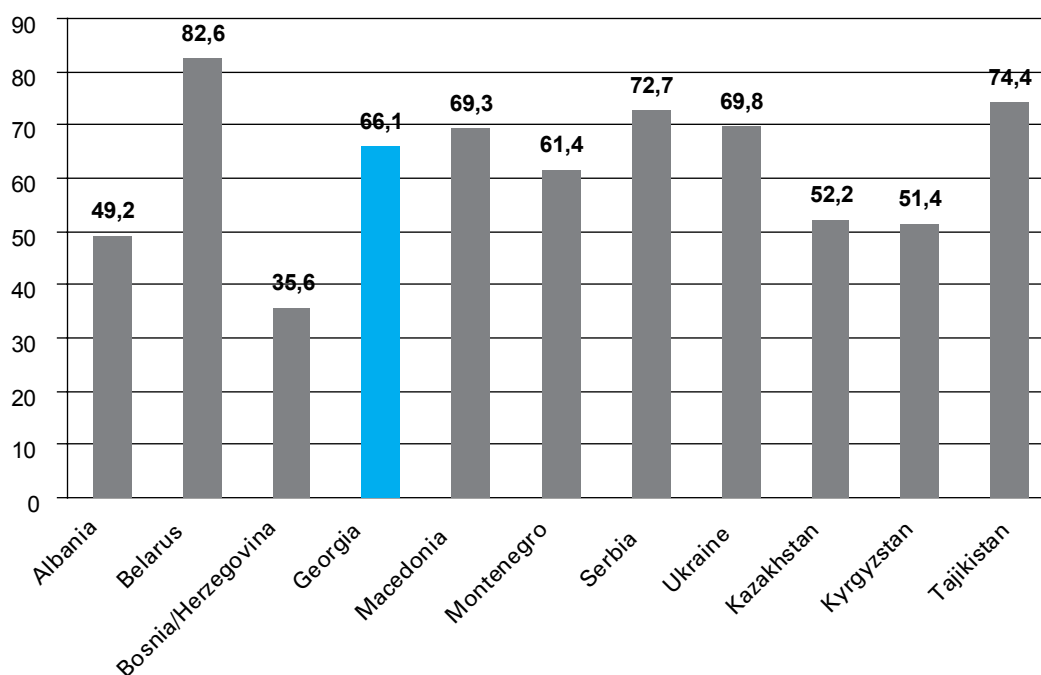
The analysis of the 2005-2006 MICS data from Georgia shows that within a sample of over 4,000 children aged 2 -14 years sixty six percent of children were subjected to at least one form of psychological or physical punishment by their mothers/caretakers or other household members. Figure 1.2 shows how this compares to rates for other countries in Eastern Europe and Central Asia. Georgia would seem to be about average for the region. However for severe physical discipline a rate of 19 percent was found for Georgia which while not outside the international range illustrated in figure 1 is the highest for the region which rates vary widely between 19% (Georgia) to 0.7% (Kazakhstan)⁵.

⁴ The Multiple Indicator Cluster Survey (MICS) is a household survey program developed by UNICEF to assist countries in filling data gaps for monitoring the situation of children and women. It is capable of producing statistically sound and internationally comparable estimates of these indicators.

⁵ The wide variation found raises a query over the possibility of a difference in interpretation of the question about severe discipline. The current study (subject of the report) found that twisting ears is a common form of discipline in Georgia. The MICS asks about hitting on the ear which if positive answers were recorded for ear twisting would greatly increase the overall rate found for severe physical discipline in Georgia

MICS reports that 12.7% of mothers in Georgia considered physical punishment to be necessary. The range for the region was from 15.9% in Ukraine to 5% in Montenegro. In addition to Ukraine, Belarus (15.2%) and Tajikistan (14.9%) had rates higher than Georgia.

Figure 1.2 – Percentage of children (2-14) from countries in Eastern Europe and Central Asia experiencing any physical or psychological punishment



Other data within Georgia is small scale or comes from studies not primarily looking at violence. However it is sufficient to confirm that Georgian children are suffering abuse and neglect. Of 184 school children aged 13-16 consulted in 2004 - 05 by PHMDF⁶, 36% considered themselves to be the victims of emotional abuse in the home, 12% of physical abuse and 4% reported they were neglected. They also reported that abuse and neglect were happening within the school system.

Research on Early Childhood Development, which was carried out in 2005 for UNICEF by Selim Iltus and included 741 families with a preschool child, found that the most common form of punishment was slapping (38%). Interestingly once again most parents claimed to believe that corporal punishment is not necessary to raise a child; yet, were practicing it regularly.

Violence in Social Care Institutions

Numerous studies have consistently confirmed the high rates of violence in institutions (UN Study) with some studies finding rates of violence six times greater than in family based care (Barth 2002). In Kazakhstan, 69% of children reported they had been subjected to violence within the institution, and for 28% this was a regular occurrence (Almaty 2002).

⁶ The Public Health and Medicine Development Fund of Georgia (PHMDFG) is a non-governmental, non-profitable, registered organization that initiated its activity in 1999. PHMDF believes that Georgian children should live in environment protected from abuse, to promote their development as valued members of society.

The increased reliance on institutional care in CEE, CIS and Baltic states following the collapse of communist governments is well documented (TransMONEE Database 2002). Some parents living in severe poverty place their children in institutional care because they believe that their children will receive better access to education, nutrition and health care. Within the region it is not unusual to find that children in residential care have been abused within their biological families before being placed in the institution (SOS-Kinderdorf 2005).

Within Georgia both qualitative and quantitative research shows that children in institutions have at least one biological parent, and the most widespread reason for family separation and institutionalization is extreme poverty faced by their families. These findings apply particularly to children who require special care (Rusudan Telia 2005, Natsvlashvili 2007).

A small scale study conducted by PHMDF, which was undertaken in 2005-06, suggested that violence and neglect were occurring within institutions during that period at that time. One hundred and ten children living in institutions in two regions of Georgia were interviewed. Seventy four percent (74%) reported they were victims of psychological abuse, 63% physical abuse and 77% neglect.

Violence in Schools

The forms of violence found in schools are both physical and psychological, and usually occur together. Forms of violence perpetrated by teachers and other school staff include physical punishment and other cruel and humiliating forms of punishment or treatment, sexual and gender-based violence, and bullying. Forms of violence perpetrated by children include bullying⁷, sexual and gender-based violence, schoolyard fighting, gang violence, and assault with weapons (UN Study).

The most common forms of violence at school are fist fights, shoving, and bullying (Murakami et al 2006). Risk factors for serious school violence include a large school size, older children, and the presence of gang and drug-related activity. Individual risk factors such as obesity, ethnic or racial minority, being poor, or being of a sexual identity minority have also been documented as risk factors for peer violence (Murakami et al 2006, Pickett et al 2005, Culley et al 2006).

In a large multi-national study conducted in 37 countries an average of 28% of students reported being the victim of some form of violence in the last month (range by country 5-75%), and an average of 48% of students reported having a friend who was the victim of school violence in the last month (range 15%-80%) (Akiba 2002). Rates of such violence are highest for the eastern European countries included in this study, such as Romania and Hungary (comparable data is unavailable for Georgia).

Younger children are more likely to be victims of bullying and older children the perpetrators. A study from Lithuania (Zaborskis & Vareikiene 2008) illustrates the complex relationship between bullies and the bullied. The data obtained from the anonymous survey, which included 5,645 students (aged 11 to 15 years), showed that more than half (52.3%) were involved in the bullying process at least two times per month: 17.9% were involved as bullies ("aggressors"), 18.3% were bullied ("victims"), and 16.1% bullied others and were bullied themselves. Interestingly a significant association between experiencing bullying and adverse health outcomes was found.

Homicide and suicide is rare at school and represents only 1% of total suicides and homicides in the United States (Murakami et al 2006). However, when such sentinel events occur, they can

⁷ Bullying involves intentional, and largely unprovoked, efforts to harm another. Bullying can be physical or verbal, and direct or indirect in nature.

mobilize both fear and action in school communities. Feeling safe in school is critical for optimal development and educational success (Nansel et al 2004).

A great deal has been written about the influence of the school climate on violence from a theoretical perspective and there is some empirical data showing that improving the school climate should be the main task for schools who wish to reduce violence. Definitions of terms such as school climate are always a problem in this field; particularly given the rich cultural and linguistic variety in Europe (Smith 2003). A solution to this endemic problem which besets all surveys and reports on violence in schools is recommended in the Council of Europe Handbook for Schools (Gittins 2006). It suggests using the term *Convivencia*; a Spanish word which translates into English as “living in harmony” to help understand the concept of “school climate”. The task for schools then becomes the creation of a pro-social climate (*Convivencia*) which discourages violence and encourages the growth and development of young people.

Child Welfare Reform in Georgia

The study on violence should also be seen against the background of ongoing child welfare reform in Georgia. One of the study’s main aims was to provide evidence for those charged with developing policy and services within the reform program.

In April 2005, the Government of Georgia issued a decree on: “The Governmental Plan of the Protection of Children and Deinstitutionalisation 2005-2007”. A Governmental Commission on Child Protection and deinstitutionalization (GCCPD) was established to implement the Plan and includes representatives of the Ministry of Education and Science, the Ministry of Labour, Health and Social Affairs and the Ministry of Finance.

The Government of Georgia has been committed to the reintegration of children deprived of parental care back into their families and communities and efforts to reduce the numbers of children living in Institutions have met with some success. In 2006, statistics from the Child Welfare Reform Project (Natsvlshvili 2006) showed that of 7,566 vulnerable children receiving different types of statutory, family support or family substitute child care services, 31% were receiving community-based family type/family support services (small group homes, foster care, day care, etc.) or had been reintegrated into their biological families (2,357 children). The majority of the remainder, around 5,000 children continued to live in residential state care. According to the UNICEF Country Profile 2008, the number of children living in State residential care is now 3,106.

At the current stage of the Reform, the Ministry of Education and Science as the main actor, supported by UNICEF and the TACIS (Technical Aid to the Commonwealth of Independent States) grant from the European Commission had developed the Child Action Plan (CAP) 2008-2011. CAP is approved by GCCPD and distinct from the earlier, looks beyond de-institutionalisation and focuses on poverty, use of large scale residential institutions and violence against children as the main problematic areas.

The main objectives of the ongoing Child Welfare reform are as follows:

- To develop state policy regulating the provision of assistance and protection to children in families with special situations;
- To harmonize the legislation concerning childcare;
- To reduce the number of abandoned children by improving the social protection system and the better management of state, central and regional agencies;
- To strengthen the local social care services;
- To reduce the number of children placed in state institutions;
- To support the deinstitutionalization process;
- To improve the financial situation and enhance human resources engaged in childcare;
- To develop inclusive education;

- To rationalize financing of the child care sector and to ensure efficient use of existing financial resources.

The Plan prioritizes child protection policy development. The core of the policy will be an integrated approach, linking legislation with effective referrals and interventions for vulnerable children. It emphasizes action at the level of the regions, encouraging each region to have a Centre for Rehabilitation and Care to child victims of violence.

School discipline methods have also been addressed within recent legislation. According to the Law on General Education (April 8, 2005), school discipline methods should respect a child's freedoms and dignity. Absolutely no violence against a pupil is permissible within the schools, and schools should act in the event of a physical or verbal insult. In order to follow this law, schools will need to develop procedures for identifying and responding to violence. The Ministry of Education and Science is actively developing a Safe School policy, which will be informed by the section of the study addressing violence in schools.

Research Tools

The ISPCAN Child Abuse Screening Tools (ICAST)

One of the recommendations of the UN Study on Violence was that scientists and policymakers develop a shared set of definitions and research tools to study violence against children. The International Society for the Prevention of Child Abuse and Neglect, with support from UNICEF and the Oak Foundation, agreed to take a lead role in developing and pilot testing a new set of shared instruments.

The need for shared definitions and research tools are predicated on the notion that access to common tools may be useful in: 1) defining the scope of a problem in a national context; 2) setting national priorities and benchmarks for comparison; and, 3) establishing program and funding priorities in national and international contexts (UN Study 2006, WHO/ISPCAN 2006).

The initial instruments were developed with the input from scientists from 40 countries. Once drafted the instruments were subjected to three rounds of Delphi review by an international panel of experts. The result of the development process was the production of a core set of instruments to be used to assess child victimization in a multi-national, cultural and linguistic context. These instruments are known as the ISPCAN Child Abuse Screening Tools (ICAST) P (parents) R (retrospective) and C (child) versions. They have also been translated and back translated into a number of languages⁸ and pilot tested in four to eight countries each. The ICAST C has been further divided into an instrument to assess victimization in the home (ICAST C H for home) and an instrument to assess victimization in the school or work place (ICAST C I for institution). The final versions of the questionnaires, together with research guides, are available from ISPCAN (www.ispcan.org)

The ICAST P, ICAST CH were used in Georgia to study violence in the home and the ICAST CI to study residential institutional violence. Due to the comprehensive nature of the ICAST CI, its multi-cultural development, use in Georgia, and its prior translation into the Georgian language, it was decided that ICAST CI should also be the core instrument for the School Study.

The tools use structured interviews which focus on acts experienced by children that were agreed by the scientists to be common or serious. While the tools do not include a definition of abuse, many if not all of the actions included can be described as distressing or degrading for a child.

⁸ The ICAST Parent and Child questionnaires are available from ISPCAN in Arabic, English, Hindi, Marathi and Russian

Some actions have the potential to cause physical or psychological harm, and as such would in some countries, justify referral for a child abuse assessment. When considering all the actions described in the questionnaires and reported on in this study it would be appropriate to reflect that the Convention on the Rights of the Child requires prohibition of all violence against children including corporal punishment and other cruel or degrading punishment.

Assessment of School Climate

The questions used to assess school climate or *Convivencia* were adopted from the Health Behaviour in School-aged Children (HBSC) research questionnaire (WHO ongoing) and covered attitudes towards school, relationships between students, treatment by teachers, position of parents and location and timing of bullying and violence. HBSC is a cross-national research study conducted in collaboration with the WHO Regional Office for Europe. Initiated in 1982 by researchers from three countries, the project was adopted shortly afterwards by the World Health Organization as a WHO collaborative study. There are now 43 participating countries and regions. The research tools have demonstrated strong psychometric properties and cross cultural reliability and validity.

Chapter Two: The Study

Study Aims

The Aims of the study were to identify within Georgia:

- The extent of violence⁹ against children;
- The pattern of violence;
- Factors associated with violence;
- The extent and type of response needed to prevent violence, child abuse and neglect.

The proposed follow on products of the study were:

- Policy recommendations for the Government of Georgia;
- Advice on new initiatives and the enhancement of existing programs for recognition and intervention in cases of violence;
- Recommendations for public awareness campaigns;
- Recommendations for a training program for professionals working with children.

The nation wide study sought to include children aged 0 – 18 living both in the community and in special circumstances. Experience from piloting the ICAST tools and advice from the ISPCAN consultants indicated that children aged eleven years or older could themselves be interviewed, while data relating to younger children would best be obtained by interviewing parents or other carers.

Study Methods

Target Groups

The target groups for phase one included representative samples of children drawn from the general population, large collective centres for Internally Displaced Persons (IDPs) and Social Care Residential Institutions. The collective centres were not situated in the conflict zones and were ones in which at least 150 people, including children, were living.

A total of 3,001 interviews were undertaken in phase one. This number included:

- Interviews with the primary carers (mainly parents) of 1,650 children who were drawn from the general population (1,100) and collective centres (500). The children were all under 11 years of age and included 835 boys and 815 girls.
- Interviews with a total of 1,050 children 11 - 17 (over 11 years and under 18) years living at home. This number included 700 drawn from the general population and 350 from collective centres. There were 524 boys and 526 girls.
- Interviews with 301¹⁰ children aged 11-17 years who were living in Social Care Residen-

⁹ Includes Child Abuse and Neglect (CAN)

¹⁰ After data entry it was discovered that 301 children had been interviewed. The decision was made to continue the analysis with 301 children.

tial Institutions. All the institutions were public and for children without disabilities. The sample included 156 boys and 145 girls.

The target group for phase two was a representative sample of 1,300 school children aged 11-17 years in 99 schools, including 33 in Tbilisi and 66 in the regions of Georgia. Because the children were identified by school year (grade) some children aged 10 years were included. There were 645 boys and 655 girls.

The samples for both phases of the study were drawn from the nine regions of Georgia and Tbilisi. The distribution both between Tbilisi and the regions and between urban and rural¹¹ areas reflected the population distribution of Georgia.

The parents from the general population were interviewed at home and the children in school. Parents and children from the IDP centres were interviewed in the centres and children from the institutions were interviewed in the institutions. The children for the school study were interviewed in school.

Sampling

The sampling methodology was designed to provide representative samples of the target groups. The sampling was undertaken using a random, multistage cluster selection. Details of the sampling methodology can be found in Annex 2.

Research Tools

As described in Chapter One, the study used three of the ICAST instruments:

- ICAST Parent (P) – used with the carers (mainly parents) of 1,650 children under 11 years.
- ICAST Child Home (CH) – used with 1,050 children aged over 11 years and under 18 years.
- ICAST Child Institution (CI) – used with 301 children aged over 11 years and under 18 years in residential institutions and with 1,300 children aged over 10 years and under 18 years in 99 schools.

The core of the questionnaires with numbering was left intact to allow the local project team and ISPCAN to compare the data with that obtained from other countries.

The Parents questionnaire provided information about both the respondent's and any other carer's use of physical and psychological punishment towards an index child, as well as their view on that child's experience of neglect and sexual abuse. Parents are also asked about the use of positive methods of discipline and, in an open question, for their ideas on successful methods.

The questionnaire designed for children aged 11 years or older and living at home asked about their experiences of exposure to violence in the home or near by, and experiences of direct physical and psychological violence, sexual abuse and neglect. They were also asked to indicate whether the perpetrator was an adult or another child. Additional open ended questions also allowed them to share their views on violence against children and ways to prevent it.

The children living in Institutions were asked about their experiences of physical, psychological or sexual violence directed towards them by an adult or other child within the institution. They were also asked about their experiences of neglect while living in the institution. These questions

¹¹ Urban is a town/city type settlement and Rural is village/country type settlement.

were added to the standard ICAST questionnaire by the local team (using questions from the Home questionnaire) as it was felt to be important to understand the child's view of the physical and emotional care they were receiving from the institution.

The other main modification made to the content of the questionnaires concerned demographic questions, added at the beginning of the questionnaires given to both parents and to children. These questions related to celebration of the child's birthday, summer holidays and family possessions, and allowed the samples to be divided into three economic groups (low, middle and high) (Annex 3). This classification is specific to Georgia where average incomes are low, so the middle economic group should not be equated with what would be understood as "middle class" in a Western European country.

All the questionnaires allowed for the collection of basic demographic data such as age, gender and location.

All the questionnaires asked for information on actions and experiences that had ever occurred to the child as well as more specifically for those happening within the last year. Data was collected on frequency of actions and experiences and where appropriate on the identity of the perpetrator (i.e. respondent or other carer for parent questionnaire and adult or other child for Child questionnaires)

For the school study the same ICAST (CI) was used as for the children in institutions. In order to better inform the MoES Safe School Initiative, two additional pages of questions (taken from the HBSC questionnaire) on the school climate, attitudes, location, and timing of bullying and peer violence were added. These questions were intended not only to assess the practical aspects of school violence, such as common times and locations, but also to provide a more general sense of how the children felt about their school, their safety, involvement of parents, and attitudes of teachers.

All the questionnaires were translated into Georgian and independently back translated into English to ensure that the intended meaning of the questions had not been lost in the process. The UNICEF consultant examined the back translations and identified any mistranslations and communicated these with the research team who made the necessary adjustments to both the Georgian questionnaire and the back translations (these are available from UNICEF or PHMDF).

The reference group acting as a professional focus group also commented on the questionnaires as did the pilot groups of children and a focus group of parents conducted by the research company, BCG.

The Manuals provided by ISPCAN to accompany the questionnaires were used to guide the implementation of the study. These were translated into Georgian, modified a little to adapt to the local context and back translated. Once again anything that had possibly been "lost in translation" was discussed and the necessary adjustments made. (Both Georgian versions and the back translated version are available from UNICEF or PHMDF). The interview team supervisors were provided with the manuals and the written guidance for interview teams was developed using the manuals for guidance.

Interviewers

Interviewers came from BCG's established pool of experienced personnel and were already working in regional teams, which each had a supervisor. They fulfilled the criteria laid down in the ICAST manual for interviewers and were provided with additional training (see below) to equip them to undertake interviews with children and to administer questionnaires on an emotive topic.

Training for Interviewers

It was decided that the most effective way of training the interviewers was to train the supervisors and to give them the tools to train their local teams. Thus, the initial training of supervisors took place in 2 sessions:

- Session one: organised by Psychologists from PHMDF and the UNICEF Consultant covered issues of child abuse and neglect and ethics and also provided an opportunity to discuss the nature of the questions included in the questionnaires.
- Session two: run by BCG looked in detail at the questionnaires (after translation) and the methodologies for interview and data entry.

Annex 3 outlines the objectives of the training organised by PHMDF and the UNICEF Consultant.

Following the training by PHMDF the supervisors trained their teams of interviewers. This process was supervised by PHMDF whose staff attended a number of the sessions. To facilitate this training by the supervisors, (objectives also included in Annex 4) they received a training package with:

- Set of Power point with trainer's notes;
- Script for role play with trainer's notes;
- Outline of suggested debriefing session;
- Contact telephone number (PHMDFG) in addition to BCG if they require support or advice in relation to child abuse and neglect;
- Details of any local services and NGOs working with child abuse and neglect.

Interview Format

The ICAST parent questionnaire, as with the ISPCAN pilots was administered in individual interviews. These interviews were carried out in either the respondent's home or in an IDP centre. The majority of the ISPCAN piloting interviews were employed using group interviews with children. However, doubts about the group interviews were expressed by the local research team, the main reason being that the interviewers were more comfortable with individual interviews. Time constraints did not allow for additional training on group interview techniques. Therefore to resolve this some early piloting took place with a "rough" translation of the child home questionnaire with a group of children (who also acted as a focus group) to allow the team to decide if the study would best be conducted as group or individual interviews. This led to the decision being made that interviews with the children would be individual.

In phase two, individual interviews were undertaken by the same interviewers as in phase one, and took place in school.

Piloting

Before finalizing the research tools, consultation with the reference group took place and a focus group was run with parents – primarily for the purpose of deciding on an interview format. Once, the final translation of the questionnaire was available, it was piloted by the supervisors of the interviewers who interviewed 30 parents and 30 children from the community as well as 30 children from the institutions. The piloting was monitored by PHMDF team members, and while it did not result in amendments to the questionnaires, it did identify the need for additional instructions and training. Additional instructions and training were implemented through a workshop organized by PHMDF, which took place before the start of the field work.

Field Work (October & November 2007)

BCG was responsible for planning and executing the field work using their regional teams of interviewers. Two members of PHMDF provided support to the interviewers and assisted in monitoring the quality of the interview process. No major problems were encountered. Fourteen of the selected children decided not to participate but all those who agreed to be interviewed completed the interviews and answered all the questions. All of the selected parents (primary carer of the index child) agreed to participate, but a few parents chose not to answer one or two questions. These were recorded and allowed for in the data analysis.

Field Work (January 2008)

The same process was followed for the School Study. Once again the majority of children selected agreed to participate and completed the interview. Only six children refused, which with a total of 1,300 interviews, gives an acceptance rate of 99.5%.

Data Management

Data management was undertaken by the research company, BCG, who designed the data entry sheet and cleaned the data and prepared the database for statistical analysis. This was undertaken using SPSS. This provided both descriptive data and the possibility to calculate frequencies of types of violence as well as cross tabulation of the victim and perpetrator where appropriate.

For questions addressing the school climate means were calculated for children's attitudes towards blocks of questions relating to attitudes towards school, relationships between students, treatment by teachers and position of parents. Frequencies were also calculated for children's reports of bullying according to place and time.

Further analysis was undertaken within and between the target groups to identify significant differences for such variables as age, gender, location and economic group.

Ethical and Safety Issues

Ethical review

- The research plan and associated documentation was submitted to ISPCAN and approved by their Ethical Committee;
- The reference group was invited to comment on the ethical aspects of the research plan.

Consent

In the process of developing the Consent Protocol we took into account that there is no law in Georgia that requires the consent of a parent to interview their child. We felt, however, that parents should be informed in advance of their child's possible participation in the study. During the study children over 10 were interviewed, who we considered to be of sufficient age and understanding to give their "own" consent to be interviewed.

In order to conduct interviews in schools, the permission and co-operation of school directors were required. They were also asked to inform parents that the study was taking place. The protocol covered:

- Obtaining consent from directors of schools and institutions selected as target locations;
- Gaining consent from participants (adult and child);
- Informing parents in target schools of their child's possible participation in the study.

Details of the letters prepared to give information about the study to the above groups can be found in Annex 4. These were used in both phase one and two of the study. Training for the interviewers covered the way in which they should introduce themselves.

Safety of Participants

The safety of participants was covered in detail in the manual, instructions to interviewers and in the face to face training of supervisors and interviewers and included.

- Confidentiality of responses;
- Safeguarding privacy;
- Right of refusal to answer;
- Right to stop;
- Debriefing;
- A crisis intervention plan formulated to address crises encountered in the field with local Service referral.

Safety for Interviewers

Once again the issue of safety was covered as a priority in the manual, instructions and during training. It included:

- Interviewer never goes alone to field site;
- Interviewer will first meet with local official(s) to ensure authorization, protection, support etc;
- Field supervisor always knows whereabouts of each interviewer;
- Interviewers wear badges identifying themselves as staff of BC;
- Interviewers discuss project as one related to health of women and children;
- Interviewers never administer the questionnaire when others may be listening.

Consultation with Stakeholders

A reference group with representation from the stakeholders was established to advise on the project and also to act as a focus group during the development and implementation of the project. In December 2007, when the initial data analysis was complete, a consultation meeting was held in Tbilisi with the main stakeholders (representatives of Government Ministries and major NGOs with an interest in the topic). This meeting discussed the implications of the findings for development of policy and services.

For the School Study there was ongoing consultation with the Ministry of Education and Science, and consultants working with the Ministry and UNICEF on the Safe School initiative.

Chapter Three:

Carer's Reports of Discipline, Punishment and Violence in the Home

To gain an understanding of the use of physical and psychological punishment used in the home for children from birth up until their 11th birthday the ICAST parental questionnaire was administered to the primary carers of 1,650 children. This included 1,100 children from the general population and 550 children living in the larger IDP collective living centres (with 150 or more people). The questionnaire also allows data to be collected on positive management behavioural approaches, and asks the carer about occasions when the child's basic care needs had not been met and their knowledge of any sexual abusive incidents experienced by the child. The sampling was designed to provide a representative sample of these two target groups. The data were collected for one child in the family (index child).

Characteristics of Sample

The characteristics of the sample are shown in Table 3.1.

Table 3.1 Characteristics of Index children (gender, location & economic group)

Target Groups	Gender				Location				Economic Group					
	M		F		Tbilisi		Region		Low		Middle		High	
	N	%	N	%	N	%	N	%	N	%	N	%	N	%
General Population N = 1100	541	49.2	559	50.8	264	24.0	836	76.0	174	15.8	629	57.2	297	27
IDP N = 550	274	49.8	276	50.2	220	40.0	330	60.0	176	32	302	54.9	72	13.1
Total Community N = 1650	815	49.4	835	50.6	484	29.3	1166	70.7	350	21.2	931	56.4	369	22.4

A higher proportion of the IDP group came from Tbilisi reflecting the concentration of IDP centres in the capital. In both the general population and IDP groups over half of the sample came from the middle economic group (see Annex 3 for classification). Two thirds of the total sample was living in urban areas, which included Tbilisi, and one third in rural areas reflecting the distribution of the Georgian population.

Table 3.2 shows the age distribution of the combined target groups.

Table 3.2 Age Distribution

age	%
0 < 1	4.6
1	6.9
2	9.6
3	8.9
4	9.3
5	9.0
6	9.1
7	9.2
8	8.7
9	9.1
10	15.6

73.4% of the children had siblings, 29.4% were the eldest and 35.4% were the youngest in their sib ships.

Identity of Respondents and Other Carers

For the total sample, 88.4% of the respondents were mothers, 8.1% fathers and 3.1% grandmothers with the remainder made up of a range of other relatives. 83.7% (N = 1,382) of the respondents reported that there were one or more other carers in regular contact with the child. This included fathers for 82% of these children, grandmothers for 36.6% and mothers for 11.4%. Also involved were grandfathers for 5.1% with a wide range of other relatives female and male also getting a mention by some respondents. Thus while 97.9% of the total sample had mothers involved in their care, for many children there were a variety of “other” carers who were in regular contact with the child, any one of whom may have their own views on how children should be treated. Grandparents in particular may well be advocating a continuation of the discipline and punishment they used on the parents as children. This can result in the transmission of both positive and harmful child rearing practices from one generation to the next.

RECOMMENDATION:

- *Any awareness raising/ education campaign regarding methods of child rearing must target more than just mothers or indeed just parents*

Methods of Discipline Used

The section of the questionnaire relating to use of discipline and punishment sought to gain information from the primary carer (respondent) on the methods used by them and other regular carers to teach children the right way to behave or to address a behaviour problem. The actions asked ranged from the use of positive management techniques through to actions that can, under some circumstances, cause physical or psychological harm to the child and therefore be considered to be abusive (see footnotes in Chapter One for definitions of physical and emotional abuse). Very few respondents refused to answer any of the questions. They were asked to report on whether the actions described had occurred in the last year and, if so, how frequently.

Reports of Positive Approaches

When asked about the use of positive management methods commonly used to control children’s naughty behaviour, 90.8% of the total sample reported that they and or carers had used one or

more of these methods in the last year. This included 89.8% of the general population and 92.7% of the IDPs (no statistically significant difference¹²).

Details of Positive Management

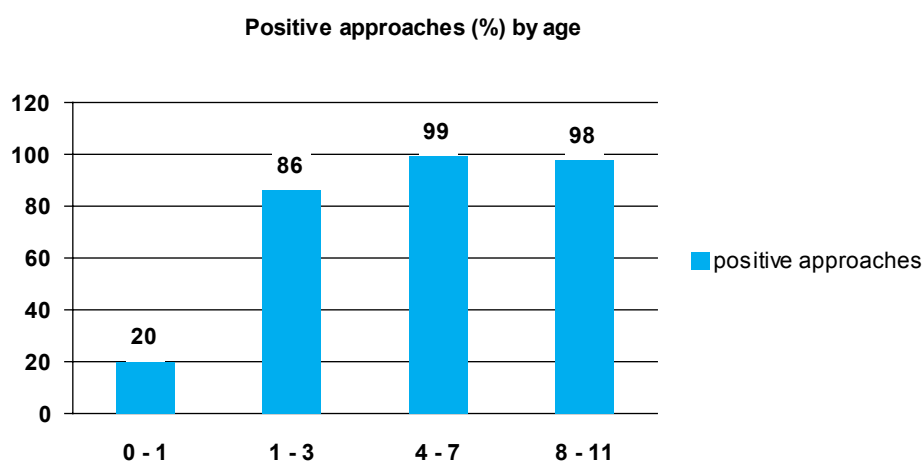
Table 3.3 gives details of positive management used by carers (both from the general population and the IDP group) during the past year. These results show that most parents in Georgia are aware of positive management techniques and are willing to use to use them.

Table 3.3 Positive Management (% Past Year)

Positive management	By Respondents	By Others
	%	%
ACTIONS		
Explained why something was wrong q8 ¹³	82.8	77.0
Told him/her to start or stop doing something q9	83.2	75.5
Gave him/her something else to do (distracted him or her) q13	71.9	59.3
Took away privileges or money, forbade something [name] liked or prohibited him or her from leaving the home q28	36.2	22.5

There were no statistical differences between the use of positive techniques with boys or girls. As one might expect (Fig. 1) the overall use of such techniques, some of which require verbal comprehension and reasoning from the child, increased with age (significance confirmed by regression analyse $p=0.00$). Distraction techniques, which could be used with younger children, did not score as high as those requiring verbal explanation by the parent.

Figure 3.1 Use of Positive Approaches by Age (n = 1650)



When at the end of the interview parents were given the opportunity to express their views in an open ended question, about methods they had found most successful they again showed their wish to apply positive methods with only a minority (3.9%) directly mentioning punishment. The

¹² Using Fishers exact test (two sided) – Significance level <0.05

¹³ Question number on ICAST Parent Questionnaire

responses included providing frequent communication/explanation (31.4%), tolerance (14.1%), mild discipline (14.1%) and maintaining a friendly relationship with the child (10.9%). Other approaches included using a religious approach, keeping the children occupied, treating them as you would an adult, using the “Spock” approach with the father being actively involved. While further examination of parents views on child rearing was outside the remit of this study, it has provided evidence that parents (and other carers) are willing to consider and try positive management techniques aimed at encouraging good behaviour in their children.

Use of Physical and Psychological Punishment

Table 3.4 summarises the responses from the respondents for the last year. Overall, 79.8% of the index children had experienced physical punishment and 82.3% psychological punishment.

Table 3.4: Summary of Physical and Psychological Punishment Used by Respondents and or other carers in the home (Last Year)

Target Groups	Physical Punishment		Psychological Punishment	
	N	%	N	%
General Population N = 1100	878	79.8	916	83.3
IDP N = 550	438	79.6	442	80.4
Total (GP & IDP) N = 1650	1316	79.8	1358	82.3
P value	0.948		0.151	

While these figures are high, they are in keeping with results elsewhere in the world, and existing data from Georgia and elsewhere in the region (see Background section).

The high rates also mean that many of the same carers who had used positive approaches had also been using a range of physical and psychological punishments. This apparent contradiction is compatible with the findings from the MICS data for 2005 (Georgia, Multiple Indicator Survey 2005) that found that, while 87.3% of the 4240 mothers surveyed felt that children should not be physically punished, only 17.5% of their children had experienced only non-violent methods of discipline by their caregivers in the previous month. Likewise, the study by Iltus (2005) showed while most parents did not think corporal punishment was necessary they were using it. Findings from all the studies illustrate the dilemma faced by many parents (and other carers) of how to encourage good behaviour and discourage bad behaviour without resorting to punitive means.

RECOMMENDATION:

- *Carers need ongoing encouragement and support to use such techniques and advice on what to do when they fail to modify the child’s behaviour.*

As with the use of positive techniques there were no statistically significant differences in the use of physical and psychological punishments between those reported by the general population responses and those reported by the IDP parents. Details of the punishments used, therefore, combine reports from the two sets of respondents.

Details of Physical Punishment

Table 3.5 gives details of the physical punishments carried out by the respondents themselves and other carers in the last year.

Table 3.5: Details of Physical Punishment in last year

Physical punishment	By respondents N = 1650		By others N = 1382	
	N	%	N	%
Spanked him/her on the bottom with bare hand q24	854	51.7	291	21.1
Shook him/her q10	761	46.1	339	24.5
Twisted his/her ear q14	723	43.8	303	21.9
Pulled his/her hair q16	720	43.7	228	16.5
Pinched him/her q30	460	27.9	140	10.1
Hit him or her over and over again with object or fist ("beat-up") q36	355	21.5	123	8.9
Slapped on face or back of head q31	339	20.6	83	6.0
Hit him or her on the buttocks with an object such as a stick. Broom, cane or belt q11	319	19.3	137	9.9
Hit elsewhere (not buttocks) with an object such as a stick, broom, cane or belt q12	148	9.0	72	5.2
Hit him/her on head with knuckle or back of the hand q15	75	4.5	15	1.1
Withheld a meal as punishment q33	57	3.5	11	0.8
Forced him/her to kneel or stand in a manner that results in pain q22	53	3.2	17	1.2
Locked him or her in a dark room q38	45	2.7	22	1.6
Kicked him/her with a foot q20	10	0.6	6	0.4
Choked him/her or squeezed his or her neck with hands (or something else) q25	7		1	
Burned, scalded or branded him/her q35	6		7	
Threatened him/her with a knife or gun q37	6		0	
Put hot pepper or spicy food in mouth q21	4		2	
Used a hand or pillow to prevent breathing q34	1		0	

The current analysis of the data does not tell us how many children were subjected to physical punishment by both the respondent and another carer. Overall patterns of punishment by the other carer were similar to those by respondent but rates were lower. This is not surprising as most carers will have had less contact with the child than the respondent.

Some of the actions described were more likely to be premeditated forms of discipline while others were actions likely to have been provoked by frustration or anger at a child's behaviour. Although some actions might be considered to be "harmless," all involve a degree of physical violence directed towards the child, and many could be seen as cruel or degrading. There is the additional danger of physical discipline escalating into a more serious assault (Graziano 1994).

Children themselves have been shown to overwhelmingly disagree with the idea that physical discipline achieves anything positive. They underlined how hurtful and humiliating it was to be hit by those who professed to love them and care for them¹⁴ (see also Willow and Hyder 1998).

It should be noted that even though the Government of Georgia, in their response to the questionnaire for the UN Study, indicated that all forms of corporal punishment are prohibited in the

¹⁴ Study undertaken by Save the Children Alliance for the UN Study

home, there is no explicit legislative prohibition on the use of corporal punishment¹⁵. Experience elsewhere in Europe shows that legal bans on the use of physical punishment are more acceptable and enforceable when preceded by awareness campaigns addressing not just the proposed prohibition but offering parents alternative ways of encouraging good behaviour in their children (Durrant 2000).

RECOMMENDATIONS:

- *The issue of physical punishment of children needs to be debated among professionals and the public;*
- *Parents and other caregivers need training and support in using alternatives to physical punishment;*
- *Legislation to support the Government's commitment to the prohibition of corporal punishment should be considered. Such legislation would specifically ban the use of violence against children even when used as a method of discipline.*

The most common punishment described by the respondents was spanking (smacking) the child on the bottom with a bare hand and – (51.7%) reported using this form of discipline at least once in the last year, with 15.7% reporting doing so more than 10 times. 21.1% of the other carers were also reported to have smacked the child in this way, with 4.5% having done so more than 10 times. Table 3.5a shows details of the frequency for both respondent and other carers.

Table 3.5a: Frequency of spanking him/her on the bottom with bare hand (%)

	Once or Twice	3-5 times	6-10 times	> 10 times	Not in past year but have done so	Never done it	N/A
Respondent N = 1650	12.9	14.4	8.7	15.7	5.5	42.4	0.4
Other carer N = 1382	7.3	5.9	3.4	4.5	3.0	75.2	0.8

Ear twisting and hair pulling also featured frequently (43.8% and 43.7%). Interestingly, the older children reported pulling hair or twisting their ear as the most frequent form of physical violence experienced in the home (See next section).

Included in the reports were examples of punishments that might well cause physical injury and if they had could certainly be considered to be child abuse. Just over one fifth of respondents (21.5%) reported that they had hit the child over and over again (see chart 3.5b for details of frequency). These may have been carers who lost control when trying to punish the child. 19.5% reported using an implement to beat the child's bottom and 9% using an implement elsewhere on the child's body. These findings are consistent with the MICS data that found that 19% of children in Georgia (aged 2 – 14) experienced severe physical discipline in the last month (this study asked about the last year).

¹⁵ Ending Legalised Violence Against Children: Global Report 2007

Table 3.5b: Details of hitting him or her over and over again with object or fist (“beating-up”) (%)

	Once or twice	3-5 times	6-10 times	> 10 times	Not in past year but have done so	Never done it	N/A
Responding carer	10.1	4.1	3.5	3.9	2.7	75.1	0.7
Other carer	4.4	2.0	1.1	1.4	1.3	89.0	0.8

There were also reports of other worrying “punishments”. Eight respondents admitted trying to choke or suffocate the child (Q 25 & Q 34) and six had burnt the child (Q 35). Other carers were also reported as having used these unpleasant methods of punishment including 7 children burnt by carers.

The children beaten with implements, those who were being “beaten up” frequently, those suffering burns, choking or suffocation raise particular concerns about possible child abuse. Indeed, in some countries if such actions came to the awareness of professionals they would trigger a child abuse investigation.

RECOMMENDATIONS:

- *There needs to be a child protection system¹⁶ that includes the identification and investigation of suspected child abuse in the general community;*
- *Such a system must be easily understood and accessible to children, families, the public and professionals;*
- *Professionals will need training in the identification and prevention of child abuse;*
- *Community based services should be developed to respond to the needs of abused children and their families and to prevent abuse in cases identified as high risk within communities.*

Another issue raised by the findings is the high rate of shaking reported by carers. Forty six per cent of the respondents reported shaking the child in the last year and 24.5% of the children had been shaken by another carer. 14.3% of the respondents reported having shaken the child more than 10 times in the last year. Shaking a child, especially a young child, is potentially dangerous, and if it is done violently, can cause brain damage (Guthkelch, 1971). This fact may not be appreciated by carers or even some professionals. For example, the MISC study categorises shaking as a minor method of physical discipline. While that might be correct for older children (the sample was over 2 years of age) it is not the case for babies or toddlers.

There is plenty of experience that could be drawn on from elsewhere in designing a campaign to advise parents that “It is NEVER ok to shake a baby” (NSPCC 1998 Dias et al 2005). It should also be remembered that the rate of fatal abuse is highest in the first year of life, and the consequences of non-fatal abuse, which may involve shaking can often result in life-long disabilities.

RECOMMENDATIONS:

- *Further examination of the data to determine the frequency of shaking and other abuses of small children (under two years old) should be conducted;*
- *An information campaign for professionals and the public regarding the danger of shaking babies and small children.*

¹⁶ An agreed procedure to be followed when abuse is suspected – will include a point of referral.

Details of Psychological Punishment

Details of the psychological punishments reported by the respondents are outlined in Table 3.6. Most of these actions are occasionally used by many parents, however if used frequently and in association with physical punishment such reactions to a child can adversely affect his or her emotional development leading to feelings of low self esteem and worthlessness. Often the parent will be unaware that their actions may be detrimental to the child.

Table 3.6: Details of Psychological Punishment in Last Year

ACTIONS	by respondents N = 1650		by others N = 1382	
	N	%	N	%
Shouted, yelled or screamed at him/her q18	1239	75.1	687	49.7
Insulted him/her by calling [name] dumb, lazy, or other names like that q29	514	31.2	208	15.1
Cursed him/her q23	492	29.8	113	8.2
Threatened to leave or abandon him/her q17	452	27.4	174	12.6
Refused to speak to him/her q32	410	24.9	196	14.2
Threatened to invoke ghosts or evil spirits or harmful people q19	330	20.0	145	10.5
Threatened to kick out of house or send away for a long time q26	192	11.6	65	4.7
Used public humiliation to discipline him or her q39	101	6.1	36	2.6
Locked out of house q27	66	4.0	25	1.8

By far the most commonly reported action was shouting, yelling or screaming at the child. Three quarters of the respondents reported doing so in the last year, with 30.6% reporting that they did so more than ten times (table 3.6a). It should also be noted that almost a quarter of respondents reported that they had never behaved in this way towards the child.

Table 3.6a: Details shouting, yelling or screaming (q18)

	Once or Twice	3-5 times	6-10 times	> 10 times	Not in past year but have done so	Never done it	N/A
Responding Carer	13.9	16.6	13.6	30.6	0.7	24.1	0.1
Other Carer	14.0	13.8	8.5	13.5	1.4	48.4	0.5

The next most frequently reported action was calling the child by a derogatory name in order to insult him or her. Table 2.5b shows the frequencies for this action.

When considering the impact of the actions on the child we must remember that we are considering children ten years old and younger. Small children are likely to be frightened by many of the actions described above, which of course may be the parent or other carer's intent. Threats to abandon, send away or exclude a child from the home are potentially particularly harmful and can lead to feelings of insecurity in the child. For example, over a quarter of the respondents used

threats of abandonment. Locking a young child out of the house can also expose a child to a variety of physical dangers, and may even encourage the child to run away from home. It should also be remembered that research has shown an association between physical and psychological abuse, with children suffering from one form of abuse at an increased risk of suffering another (for example, Glaser, Prior and Lynch 2001, Dong 2004).

RECOMMENDATIONS:

- *Both professionals and the public need to gain awareness of the harm that psychological punishment can cause to a child's emotional development;*
- *Severe examples of persistent psychological punishment should be referred to as possible child abuse;*
- *Treatment facilities, including mental health services, should be available to families where there is serious and persistent psychological punishment.*

Table 3.6b: Details of insulting him/her by calling him/her dumb, lazy, or other derogatory names (%)

	Once or Twice	3-5 times	6-10 times	> 10 times	Not in past year but have done so	Never done it	N/A
Responding Caregiver	10.8	9.0	5.3	6.1	0.8	67.6	0.4
Other Caregiver	6.2	3.9	2.5	2.4	1.4	82.8	0.7

Associated Factors

Gender and Age Differences

It was possible to compare the rates for physical and psychological punishment by gender (Table 3.7). There were no statistically significant differences. Thus, for children under 11 years of age, carers were reporting the same approaches to discipline for both girls and boys. These findings vary in comparison to the MICS findings, which found boys more likely to be disciplined by both physical and psychological methods than girls. This may be because the MISC survey excluded babies and extends to only age fourteen.

Table 3.7: Differences by Gender

	Total		Physical Punishment		Psychological Punishment	
	N	%	N	%	N	%
Boy	815	49.4	665	81.6	678	83.2
Girl	835	50.6	651	78.0	680	81.4
Total	1650	100	1316	79.8	1358	82.3
P value			.075		0.367	

Figure 3.2 looks at the rates of physical and psychological punishment by age. Regression analyses shows (table 3.8) that both physical ($p=0.00$) and psychological ($p=0.00$) punishments increased with age. High rates of physical punishment begin after the first birthday but even so almost one fifth of the babies were subjected to physical punishment. The use of physical punishment peaks with the four to seven age group, covering the preschool period and the first year or

so of school. Psychological punishments remain high until the age of 11. Psychological punishments also seem to be commonly introduced for the one to three year age group, and increased up to 90% for the over fours and staying high in the eight to 11 age group .

Figure 3.2 Punishment by Age (% experiencing physical and psychological)

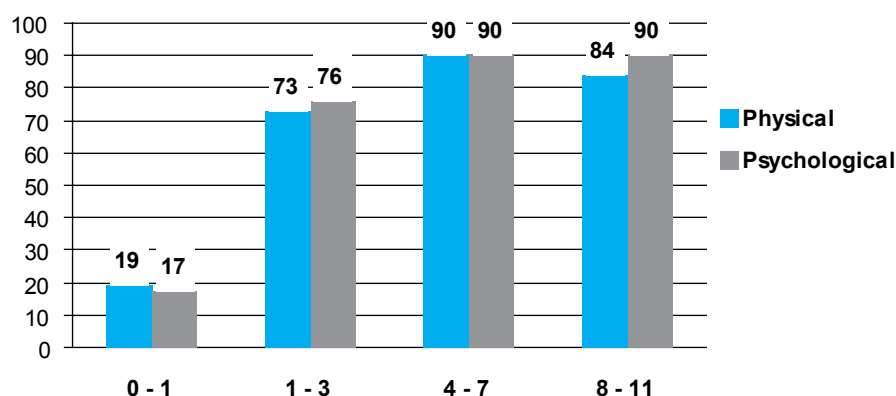


Table 3.8: Punishment by Age

Age Group (years)	Total	Physical Punishment		Psychological Punishment	
		N	%	N	%
0 - 1	75	14	18.7	13	17.3
1 - 3	524	383	73.1	399	76.1
4 - 7	603	541	89.7	543	90.0
8 - 11	448	378	84.4	403	90.0
R Square		.057		.086	
P value		.000***		.000***	
ANOVA(b) * p<0.05, ** p<0.01, *** p<0.001					

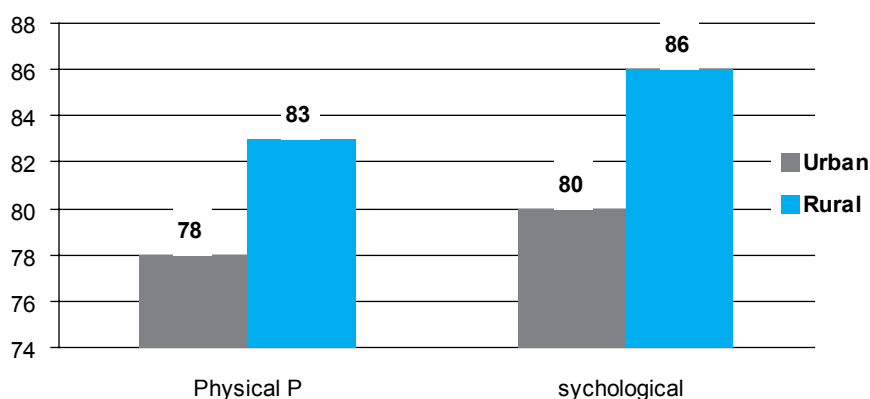
RECOMMENDATIONS:

- “Parent” awareness raising and education must take in to account the early age at which physical and psychological punishments are being introduced by families;
- Professionals working with families with babies and young children need to be aware of the early introduction of these punishments and trained to advise parents on alternative ways of rearing children. This must include family doctors and polyclinic paediatricians

Differences by Location and Economic Group

The total sample was examined for any significant difference in the use of physical or psychological discipline in Tbilisi and the regions, and between urban and rural populations. No significant differences were found between Tbilisi and the regions, but as Figure 3 shows, differences were found between urban and rural populations for both physical punishment ($p = .002$) and even more strikingly for psychological punishment ($p = .0005$).

Figure 3.3: Punishment by Location (% experiencing Physical and Psychological)



The reasons for these differences deserve further consideration. While all families, urban and rural, have access to universal services (health, education and social welfare) provision of specialist services, such as mental health services are likely to present a challenge.

RECOMMENDATIONS:

- When planning any violence prevention initiatives (including awareness campaigns) efforts must be made to reach rural populations and professionals working in remote settings;
- Provision of specialist child protection services to remote populations will require special consideration.

There was no significant difference between economical groups for physical and psychological punishment.

Reports of Neglect

The respondents were asked to answer a small number of questions regarding occasions on which the index child's basic needs had not been met in the last year. The summary of those reports is presented in Table 3.9. There are once again no significant differences between the general population and the IDPs.

Table 3.9: Summary of reports of neglect

Target Groups	Neglect	
	N	%
General Population N = 1100	239	21.7
IDP N = 550	105	19.1
Total (GP& IDP) N = 1650	344	20.8

Details of Neglect

The responding carer was asked to comment on three areas: health, nutrition and serious accidents. The results are in Table 3.10. All areas deserve further consideration as there may be issues regarding access to healthcare, ability to adequately feed a child (outside the capacity of the present study) and accident prevention. For example, there were 86 serious but preventable accidents that were reported by the respondents on their own admission. Lack of supervision that results in an unintentional injury should be of concern to those developing policies to protect children and keep them safe. Children from families under socio-economic stress are particularly vulnerable (Laing & Logan 1999, Faelker 2000).

RECOMMENDATION:

- *Need to work with professionals and parents on accident prevention.*

Table 3.10: Details of Neglect

Lack of Action	N	%
Didn't get the medical care needed q40	159	9.6
Didn't get the food or liquid that he or she needed q41	199	12.1
Seriously hurt or injured when you or another adult should have been supervising him or her and weren't? q42	86	5.2

Gender and Age Differences

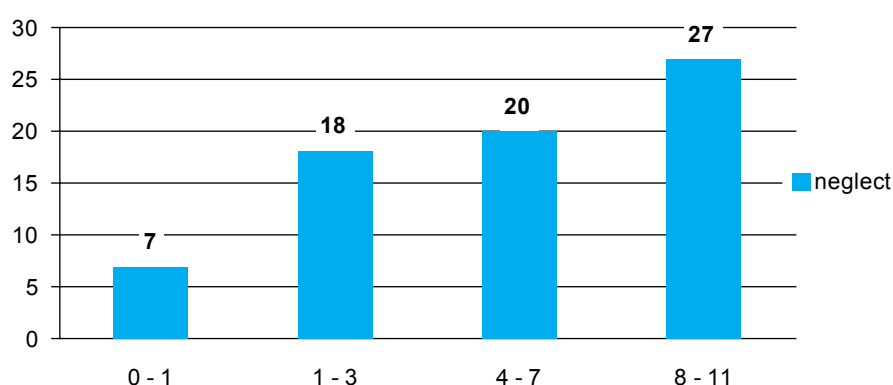
There were no statistically significant differences in the reports of neglect for girls and boys (Table 3.11).

Table 3.11 Differences by Gender

	Total		Neglect	
	N	%	N	%
Boy	815	49.4	159	19.4
Girl	835	50.6	186	22.3
Total	1650	100	344	20.8
P value			.163	

The influence of age on reports of neglect was also examined (Figure 3.4). Regression analyses shows that neglect increased with age ($p=0.00$).

Figure 3.4 Differences by age (% reported being neglected by age group)



As with physical and psychological punishments babies seem to be better protected with a jump in the number of reports for children over the age of one.

Differences by Location and Economic Group

Failure to meet a child's needs (neglect) was reported more predominantly in the regions (22.9%) than in Tbilisi (15.9%) ($p = .001$), and the differences between rural and urban parents were even more significant ($p = .000$), with 17.8% of urban respondents reporting neglect and 26.9% of rural respondents. (Table 3.12)

Table 3.12: Differences by Location

Neglect			
	N	%	p value
Tbilisi	77	15.9	.001
Regions	267	22.9	
Urban	196	17.8	.000
Rural	148	26.9	

The reasons such a high proportion of rural parents expressed concern over meeting the needs of their children satisfactorily requires further exploration. It should not be interpreted as identifying them as all wilfully neglecting their children. It could well be that rural parents were interpreting the questions differently or that they were experiencing logistical difficulties in accessing health and other services required to meet the needs of their children. While the possible association with rural poverty should not be ignored, it is unlikely to be the only explanation.

RECOMMENDATION:

- *Further consideration of the reasons for higher rates of neglect in the regions and in rural areas.*

T test analyses shows that more respondents in the low economic group felt there was a failure to meet a child's needs than in middle ($p = 0.00$) and high ($p = 0.00$) groups. Also "neglect" was more commonly reported in the middle group compared with in the high economical group ($p = 0.00$).

RECOMMENDATION:

- *A referral system for severe cases of neglect is required, and neglected children and their families need assessment and support.*

Reports of Sexual Abuse

Very few respondents reported that they considered the index child to have had experienced sexual abuse. In this section the respondent was asked about sexual abuse experienced by the child and not about their own actions. It was felt by the research team that the parents were uncomfortable with the questions and that responses were unlikely to be giving an accurate picture. Indeed experience elsewhere would confirm that parents will not necessarily be aware that their child is being sexually abused and when they are may be unwilling to share concerns especially if they suspect the abuser is a family member.

Table 3.13: Reports of sexual abuse

Target Groups	Sexual Abuse	
	N	%
General Population N = 1100	3	0.3
IDP N = 550	2	0.4
Total (GP& IDP) N = 1650	5	0.3

Details of Sexual Abuse

Only two questions were asked in regards to the details of sexual abuse. One question asked whether the child had been touched by an adult sexually in the last year, and the other asked if the child had had sexual intercourse with an adult in the last year. Three replied in the affirmative to the first question and two to the second. All the victims were girls. It is not known if these carers sought professional help and if they did what response they received.

RECOMMENDATIONS:

- *Need for further research on sexual abuse;*
- *The Child Protection System should be able to manage cases of child sexual abuse;*
- *There should be therapeutic services, including mental health services, available to respond to the needs of the sexually abused child and their family;*
- *Carers should know where to go for advice if they think their child has been sexually abused.*

ADDITIONAL RECOMMENDATION:

- *There should be ongoing data collection to monitor the effectiveness of Child Protection System (referrals and outcomes).*

Chapter Four:

Children's Experiences of Violence in the Home

This chapter describes the responses of children aged 11- 17 (up to 18th birthday) to the ICAST Children's Home Questionnaire. A total of 1,050 children were recruited for the purpose of the study; 700 from the general population and 350 from IDP collective centres.

Characteristics of the Community Samples

Table 4.1 outlines the characteristics of the children, and the age distribution of the total sample is given in Table 4.2. As in the previous chapter the higher proportion of IDPs in Tbilisi is because of the distribution of collective centres within the country. The majority of children came from the middle economic group and the majority of those in the higher group were, as might be expected, from the general population group rather than from the IDP group. Just over two thirds (67.9%) lived in urban areas and just under a third (32.1%) in rural areas.

Table 4.1 Characteristics of children

Target Groups	Gender				Location				Economic Group					
	M		F		Tbilisi		Region		Low		middle		high	
	N	%	N	%	N	%	N	%	N	%	N	%	N	%
General Population N = 700	348	49.7	352	50.3	168	24.0	532	76.0	45	6.4	365	52.1	290	41.4
IDP N = 350	172	49.1	178	50.9	140	40.0	210	60.0	63	18.0	236	67.4	51	14.3
Total Community N = 1050	524	49.9	526	50.1	308	29.3	742	70.7	108	10.3	601	57.2	341	32.5

The small number of children who were over the age of 18 had presumably had a birthday between sampling and interviewing.

Table 4.2 Age Distribution of Total Sample (1,050)

Age	%
11	14.4
12	14.4
13	14.2
14	14.5
15	14.3
16	14.7
17	13.6
18	0.7

The general population children were interviewed individually in school and the IDP children in the collective centres. Fourteen of the selected children chose not to participate but all of those who agreed to participate completed the interviews and answered all the questions.

Most of the children reported living with both parents. Only 1.7% of the total sample reported living without their mother and 13.6% without their father. The majority of children had brothers and/or sisters and often there were other adults also living in the household. Thus as we saw in the previous section some households have adults in addition to parents who may discipline a child, abuse or protect them.

RECOMMENDATION (as before in previous chapter)

- Any awareness campaigns and “parenting” education needs to extend beyond parents and reach others with responsibility for children in the home.

Summary of Experiences

Violence in or Near the Home

The children were asked to report experiences in the past year and at any time in the past. Their overall responses are summarised in Table 4.3. Exposure to violence related to incidents in the home and in the immediate neighbourhood which were not primarily directed at the child. All other experiences happened in the home and directly involved the child. For reports of physical and psychological violence and sexual abuse the child was asked whether the action was carried out by another child, an adult or both. The rates given in the Table include physical and psychological violence perpetrated by either an adult or another child in the household.

Table 4.3: Summary of Children’s Experiences – Physical and Psychological Violence

	Exposure to Violence				Physical Violence				Psychological Violence			
	Ever ¹⁷		Last Year		Ever		Last Year		Ever		Last Year	
	N	%	N	%	N	%	N	%	N	%	N	%
General Pop N = 700	351	50.1	203	29.0	489	69.9	378	54.0	488	69.7	405	57.9
IDP N = 350	165	47.1	97	27.7	268	76.6	189	54.0	256	73.1	216	61.7
Total sample N = 1050	516	49.1	300	28.6	757	72.1	567	54.0	744	70.9	621	59.1
P value			.717				.100				.258	

The IDP group reported higher rates of physical and psychological violence when looking back beyond the last year, with differences for physical violence reaching significance ($p = 0.023$). However, there were no significant differences for the past year. This may reflect higher degrees of disruption earlier in their childhoods. Surprisingly, they reported lower rather than higher rates of exposure to violence in the home or in the immediate neighbourhood.

Neglect

The children were also asked to identify whether they felt their basic needs, which included examples of physical and emotional needs, had been met. The responses are recorded in Table 4.4, with the rates being similar for both the general population and IDP children.

¹⁷ “Ever” combines rates for last year with not in the last year but has happened.

Table 4.4: Summary of Children's Reports of Neglect (Basic Needs not Met)

	Neglect			
	Ever		Last year	
	N	%	N	%
General Population N = 700	194	27.7	177	25.3
IDP N = 350	97	27.7	83	23.7
Total Community samples N = 1050	291	27.7	260	24.8
P value			.596	

Sexual Abuse

The questions on sexual abuse were the ones the children found hardest to answer and the interviewers reported this to be the section where the children seemed uncomfortable. Those monitoring the interviewing process also observed some discomfort in the interviews themselves and certainly at the initial training this is the section about which the supervisors had expressed most doubts. It is possible therefore that the research did not gain an accurate picture of sexual abuse. However, the findings would not seem to be out of line with estimates given for other European countries. May-Chahal & Herczog (2003), in a Council of Europe publication estimated overall European rates of 10% –20% for sexual abuse at some time during childhood.

Table 4.5: Summary of children's reports of Sexual Abuse

	Sexual Abuse			
	Ever		Last Year	
	N	%	N	%
General Population N = 700	75	10.7	65	9.3
IDP N = 350	20	5.7	17	4.9
Total Community samples N = 1050	95	9	82	7.8
P value			.011**	

There is a statistically significant difference between the rates reported for sexual abuse for both ever and in the last year with the IDP group reporting less ($p = .011$ for last year). There is no immediately apparent explanation for this difference.

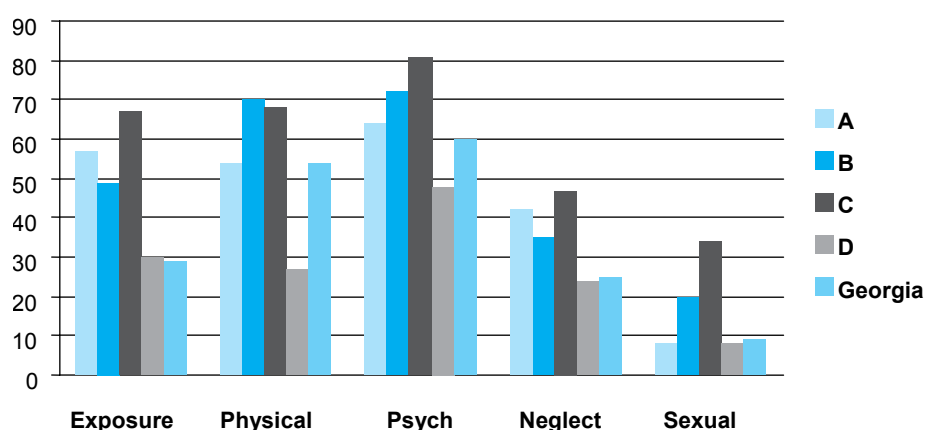
RECOMMENDATION:

- *More research on sexual abuse is needed using a different approach.*

International Comparisons

ISPCAN has made available the results from the four pilot countries (Zolotor et al personal communication) where the ICAST Home child questionnaire had been used. These countries were Colombia, Iceland, India and Russia but the results are presented in a way that did not reveal from which country each set of data came. Although the research was undertaken on a convenience sample and the sample size was not very large it does allow the data from the current study to be placed in an international context. Figure 4.1 demonstrates the comparative rates for exposure to violence, physical, psychological and sexual violence and neglect.

Figure 4.1 International Comparisons
(% of children in each country reporting violence & neglect)



A N = 110; B N = 122; C N = 111; D = 116

The findings for Georgia in relation to physical and psychological victimisation are well within the range found elsewhere. However for exposure to violence the rates are lower than in all of the pilot countries. When asked about any exposure to violence i.e. to include “has ever happened” still, only around half of the children (49%) reported such experiences.

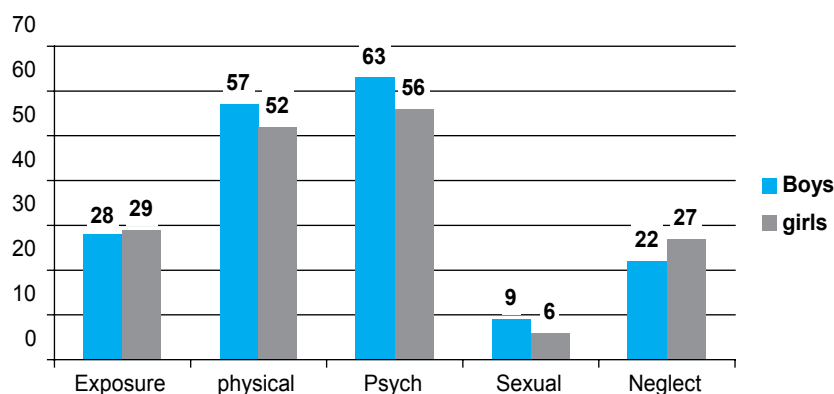
Georgia also has one of the lower reports for neglect. When it comes to sexual abuse we see a wide range from 34% to 8%. This may well reflect cultural taboos in relation to the discussing the topic rather than a real difference in incidence between the countries. For the study in Georgia the interviews were face to face while the pilot interviews in the four other countries were pencil and paper surveys providing more anonymity. This may be particularly important when sexual abuse is being considered.

Some comparative data is also available for individual questions and this will be discussed in the relevant sections below.

Gender and Age Differences

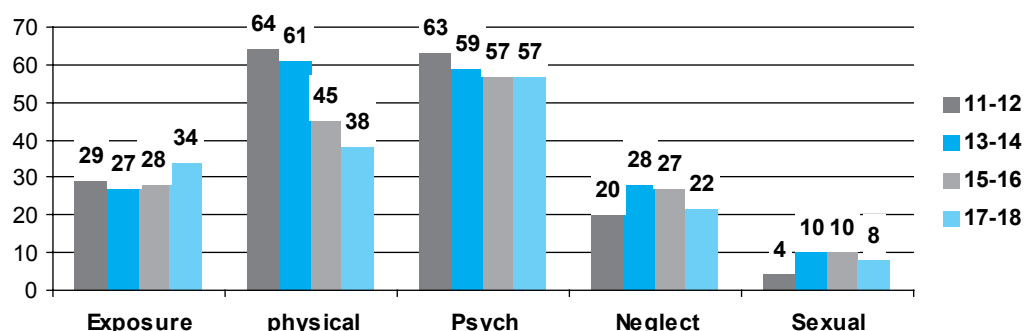
The differences between boys and girls are summarised in Table Figure 4.2. Only one of the comparisons between boys and girls reaches statistical significance; boys were more likely to report being victims of psychological violence ($p = .017$). Perhaps contrary to expectations there were not significantly more reports of boys experiencing physical violence ($p = .633$)

Figure 4.2 Differences by Gender (% of boys & girls reporting violence by category)



The influence of age on the experiences reported by the children are shown in Figure 4.3.

Figure 4.3: % of each age group reporting violence by category



Regression analysis shows that physical victimisation decreases with age ($p = .000$). Psychological violence, however, does not show a similar decline. Thus well over a half of children in the 17 to 18 age group are still reporting incidents of psychological victimisation.

Regression analysis shows no clear trends with age though it is worth noting that both the youngest and oldest age groups report less neglect. This finding may reflect better care for the younger child, and the increasing autonomy of older children and their ability to care for themselves. Regression analysis does show sexual abuse to increase with age ($p = 0.007$).

Differences by Location

There were no significant differences for rates of exposure to violence between rural and urban children or between Tbilisi and the regions.

The differences found for carer reports of Physical and Psychological Punishment, with significantly increased rates for rural families compared with urban families, are not mirrored in the children's reports of Physical and Psychological Violence. There are however significantly more reports of neglect from rural children ($p = .039$).

Both neglect ($p = .041$) and sexual abuse ($p = .023$) were reported significantly more often in the regions. This finding has implications for the development of services within the regions. Those specialist services that do exist are currently mainly located in Tbilisi.

RECOMMENDATION:

- *Services should be developed within the regions for the management of abuse (including sexual abuse and neglect);*
- *Professionals in the regions (including rural areas) require training on the recognition and management of child abuse (including sexual abuse) and neglect.*

Who perpetrated the violence?

Below we examine the perpetrators. Table 4.6 shows the perpetrator for each form of violence both for the last year and as having happened at some time (last year plus not in last year but has happened). Figure 4.4 shows the same information but just for the last year

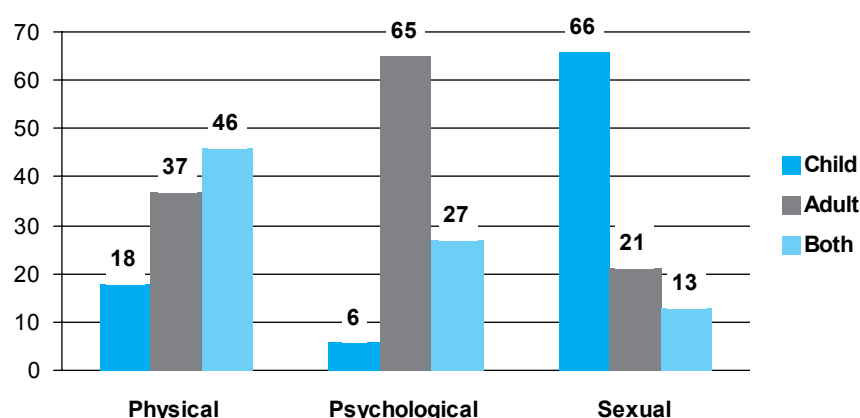
Table 4.6: Perpetrators for Ever and Last Year

	Ever							Last Year						
	Total (100%)	Perpetrator						Total (100%)	Perpetrator					
		Child		Adult		Both			Child		Adult		Both	
		N	%	N	%	N	%	N	N	%	N	%	N	%
Physical Violence	757	125	16.5	335	44.3	297	39.2	567	101	17.8	207	36.5	259	45.7
Psycho-logical Violence*	706	50	7.1	485	68.7	171	24.2	585	44	7.5	381	65.1	160	27.4
Sexual abuse	85	62	65.3	22	23.2	11	11.6	82	54	65.9	17	20.7	11	13.3

* Omits Question 25 – ‘bullied by another child’ as 100% of perpetrators will be another child.

Some children reported that they had experienced violence from both another child and an adult. The pattern of perpetrators is similar for the reports for ever and for during the last year.

Figure 4.4 % of children reporting perpetrators for last year by category of violence



For both physical and psychological violence an adult was more likely to have been the perpetrator. This finding raises the same issues as discussed in the previous chapter regarding the education of carers and the identification of children suffering harm as the result of physical or psychological abuse (see also below where the nature of the violence is discussed).

There were sufficient reports of violence by another child to raise concerns regarding peer violence in the home. In an additional question, 17.9 % of the children reported themselves as having been bullied by another child in the home in the last year and 22.8% remembered it happening at some time (ever). These reports provide evidence of the early transmission of violent behaviour from one generation to the next. Indeed the indication from the research with carers (chapter 2) and children (this chapter) is that in some Georgian households there will be three generations interacting violently with children. The children's reports of exposure to violence also indicate some violent interactions (especially verbal) between adults in the household.

RECOMMENDATIONS:

- *Further consideration of peer violence in the home and the possible link to violence in other settings;*
- *Consider ways of breaking the inter-generational cycle of violence;*
- *Design approaches to violence prevention that is inclusive of wider domestic violence.*

A total of 95 (9%) of children reported some form of sexual abuse happening in the home. While the majority of incidents involved another child or young person, adults were reported as having sexually abused a number of the children (27). We do not know if these abuses were reported to the authorities and investigated. The chances are they were not as there is no clear system of reporting within Georgia.

RECOMMENDATIONS:

- *Sexual Abuse must be included within the remit of a child protection system.*
- *Within the system there should be a clearly defined pathway of reporting and assessing cases of sexual abuse;*
- *Children, young people and family members should have access to advice and services for sexual abuse;*
- *A range of professionals will require specialized training to identify, assess and manage cases of child sexual abuse.*

When considering the sexual abuse perpetrated by another child it must be remembered the children were asked to report events that upset them or in which they were forced to participate. Thus “normal” consensual sexual activity between peers is not included. It is important to identify any children who are sexually abusing other children as without intervention they may continue to abuse into adult life. Research and clinical experience show that some young abusers are themselves victims. Evidence also shows that intervention is more likely to be successful if it happens when the child abuser is young (Bentovim 2002)

RECOMMENDATION:

- *Children who are sexually abusing other children need to be identified, assessed and given therapy.*
- *Victims of child on child sexual abuse also need services;*
- *Professionals managing case of child on child sexual abuse will require specialized training.*

Details of Experiences

Exposure to Violence

Table 4.7 gives details of the children’s reports of disturbing events either in the home or in the immediate neighborhood arranged according to frequency of positive responses for all positive responses (last year combined with not in last year but has happened). Overall, the most frequent event was having had something stolen from the home, however this affected relative few children in the last year (5.4%). The pattern for other experiences was very similar for “ever” and last year. The most frequent action relating to interactions between the adults in the household was shouting that frightened the child (15.3% in the last year). Physical violence between adults was reported by 2.3% of the children in the last year and 6.6% were frightened by adults use of drugs and 2.5% by adults use of weapons. Despite these apparently low rates, it is important to acknowledge that both domestic violence (between adults) and substance abuse are associated with the increased risk of child abuse and neglect (Cleaver et al 1999).

RECOMMENDATIONS:

- *Domestic Violence and Child Protection initiatives (policy and services) should be linked;*
- *Adult services for substance abuse should consider the needs of the client’s children.*

Looking at individual questions relating to exposure to violence the patterns reported for the pilot countries differ substantially. For example seeing rioting etc ranges from 32% to 2% (Georgia 4.9%) and witnessing adults hitting kicking each other from 25% to 1% (Georgia 2.3%). This finding is compatible with the low acceptance of physical domestic violence expressed by woman in the MICS survey. Overall, 6.9 percent of women in Georgia feel that a husband has the right to beat his wife, mostly in cases when the woman neglects the children (5.9 percent). This rate is one of the lowest in the region.

The most commonly cited exposure to violence in three of the four pilot countries was adults shouting in a frightening way (range 48% - 12%). This was also the most frequently reported experience of violence of Georgian children, with 15.3% reporting it for the last year and 23% reporting that it had happened sometime but not in last year.

Table 4.7: Exposure to Violence – Children’s Experiences - For Ever and Last Year
(In order of frequency of reported experiences)

Exposure to Violence	Ever		Last year	
	N	%	N	%
Total N = 1050	516	49.1	300	28.6
Something stolen from home (q17)	244	23.2	57	5.4
Adults shouted in frightening way (q12)	241	23.2	161	15.3
Seen people being shot, bombs, fighting, or rioting (q16)	121	11.5	51	4.9
Adult used drugs then frightened (q11)	115	11.0	69	6.6
Someone close got killed near home (q15)	88	8.4	44	4.2
Witnessed adults in home use of weapons (q14)	45	4.3	26	2.5
Witnessed adults in home hit, kick, slap (q13)	42	4.0	24	2.3

Other events included in this section relate to events occurring outside the home but close by, and will thereby influence a child’s attitudes to the use of violence.

Physical Violence

The pattern of physical violence reported by children (Table 4.8) is similar to punishment described by the carers in Chapter 2. However, there is perhaps a clearer division between actions that commonly occur and those that are both less frequent and more serious, many would say, abusive. Once again twisting ears and pulling hair feature frequently as does spanking (smacking) with a hand. Interestingly, among the ICAST pilot countries there was a wide range of reports for twisting ears and pulling hair, which ranged from 50% to 9%. Georgia’s rates for spanking with a hand were lower than for four of the pilot countries who all reported rates of 40% or higher.

Table 4.8: Experiences of Physical Violence for Ever and Last Year
(In order of frequency of reported experiences)

Physical Violence	Ever		Last Year	
	N	%	N	%
Total N = 1050	757	72.1	567	54.0
Pulled hair or twisted ear (q38)	641	61.0	435	41.4
Hit, beat, or spanked with a hand (q33)	455	43.3	293	27.9
Pushed, grabbed, or kicked (q32)	336	32.0	263	25.0
Locked in small place, tied you up, or chained you to something (q37)	73	7.0	29	2.8
Hit, beat, or spanked with object (q34)	65	6.2	35	3.3
Hold heavy load or exercise (q39)	44	4.2	35	3.3
Threatened with knife or gun (q40)	11	1.0	9	0.9
Choked or tried to drown (q35)	10	1.0	9	0.9
Burned or scalded (including putting the pepper in mouth) (q36)	9	0.9	6	0.6

The majority of children reported that the physical violence occurred sometimes rather than many times. For example, only 7.6% of the children who reported having their hair pulled or ears twisted claimed these incidents occurred many times in the last year. Only three children reported being hit repeatedly by an object in the last year. These three children, together with others who were subjected to potentially harmful actions (choking, burning, restrained), provide examples of children in need of assessment followed by appropriate protection.

RECOMMENDATION:

- *Children being abused in the home need access to a child protection referral system which will assess their needs and those of their family, and provide services to them and their family.*

Detailed data for the perpetrator was only available for all positive answers, for instance, when the child had experienced violence but not necessarily in the last year. Table 4.8a shows the breakdown for the two most common actions and for one more serious abusive action. In all three examples an adult was most likely to have been the perpetrator.

**Table 4.8a: details of perpetrator for selected actions
(of physical violence) ever experienced and remembered by child**

Action	Perpetrator		
	Child	Adult	Both
Pulled hair, or twisted ear q38 N = 641	21.2%	66.5%	12.3%
Hit, beat, with a hand q33 N = 455	31.9%	55.4%	12.7%
Hit, beat, with object q34 N = 65	n = 16	N = 43	N = 6

Psychological Violence

Details of the children's experience of psychological violence directed at them in the home are outlined in Table 4.9. While not all the questions are identical to those asked of the carers, we see a similar high reporting of screaming and insulting as common occurrences. There were less threats of abandonment (27.4% of respondent carers used it in the last year), which are less likely to frighten an older child especially if they have heard it used as an empty threat many times before. Embarrassing the child, something to which older children are particularly sensitive, was not asked of carers.

While looking at the frequency of psychological violence, most children reported experiencing it sometimes, with only a minority reporting that it had occurred many times in the last year. For example, 2.6% reported being insulted many times, and only 1% were made to feel embarrassed many times.

**Table 4.9: Experiences of Psychological Violence for Ever and Last Year
(In order of frequency of reported experiences)**

Psychological violence	Ever		Last Year	
	N	%	N	%
Total N = 1050	744	70.9	621	59.1
Scream (q18)	584	55.6	481	45.8
Insulted (q19)	320	30.5	271	25.8
Made you feel embarrassed (q20)	181	17.2	135	12.9
Threatened to hurt or kill (q24)	117	11.1	24	2.3
Threatened to abandon (q22)	93	8.9	57	5.4

Wished you were dead q(21)	90	8.6	61	5.8
Locked out of home (q23)	40	3.8	25	2.4
Have been bullied by another child (q25)	239	22.8	188	17.9

Details of the perpetrator are only available for “ever.” Table 4.9a gives the breakdown for two commonly experienced actions. It will be seen that it was an adult who was most likely to insult a child while children were more likely to make another child feel embarrassed as a way of upsetting or controlling them. The direct bullying of one child by another, and recommendations on children as perpetrators of violence, has been commented on above.

**Table 4.9a: Details of perpetrator for selected actions
(of Psychological Violence) ever experienced**

Action	Perpetrator		
	Child	Adult	Both
Insulted (q19) n = 320	20%	71.9%	8.1%
Made you feel embarrassed (q20) n = 181	48.6%	40.3%	11.0%

Many of the experiences included by the study as examples of psychological violence could be dismissed as a “normal” part of childhood. However all, especially if used in the absence of balancing positive experiences have the potential to harm a child’s self esteem and feelings of self worth. They will also encourage the child to use the same approach with peers and younger children.

RECOMMENDATIONS:

- *All those responsible for the care of children need educating in the consequences of psychological violence on a child’s emotional development;*
- *Children need education in emotional literacy and encouragement to treat their peers and younger children with respect;*
- *Children should know to whom to “report” cases of psychological violence including by another child.*

Neglect

As table 4.10 shows the most frequent form of neglect identified by the children was going hungry or thirsty. As mentioned in relation to carer’s reports this may possibly be related to poverty.

Table 4.10: Details of Neglect Experienced by the Children

Neglect	Ever		Last Year	
	N	%	N	%
Total N = 1050	291	27.7	260	24.8
Went hungry or thirsty (q26)	133	12.7	118	11.2
Inadequate support/help (q31)	93	8.9	81	7.7
Felt unimportant (q30)	93	8.9	79	7.5
Inadequate clothes (q27)	70	6.7	60	5.7
Felt not cared for (q29)	65	6.2	54	5.1
Unmet medical need (q28)	46	4.4	35	3.3

The children also reported feelings of emotional neglect. These feelings might well in part be the consequences of psychological violence and punishment.

Sexual Abuse

Despite reservations about the study's ability to gain a full picture of sexual abuse in the home, 7.8% of the children did report that they had experienced sexual abuse in the last year. The two most frequent reports were of being talked to in a sexual way and being shown pornography, both of which did not involve physical contact with the perpetrator. Sixteen children did report having their "private parts" touched and 15 reported that someone had tried to have sex with them.

Table 4.11: Details of Sexual Abuse Experienced By the Children

Sexual abuse	Ever		Last year	
	N	%	N	%
Total N = 1050	95	9	82	7.8
Talked to you in a sexual way (q41)	52	5.0	46	4.4
Shown pornography (q42)	41	3.9	35	3.3
Touched private parts (q43)	18	1.7	16	1.5
Tried to have sex with you (q46)	17	1.6	15	1.4
Made you look at their private parts or wanted to look at yours (q44)	10	1.0	8	0.8
Made a sex video of you (q45)	1	0.1	1	0.1

Most children reporting on sexual abuse in the last year reported that it had occurred sometimes rather than many times. There were, however, 7 children who reported having been shown pornography many times, and 3 children who reported that someone had tried to have sex with them many times.

The children reported the perpetrator for all experiences, whether in the last year or before. Table 4.11a gives the details. It is important to keep in mind that children were reporting unwanted experiences. Their experiences confirm the need to have a system of child protection that can respond to sexual abuse occurring in the home and have the ability to deal with both adult and child perpetrators. (See above for recommendations) Children need to know how to access that system.

Table 4.11 a: Details of sexual abuse ever experienced with perpetrator

Action	Perpetrator		
	Adult N	Child N	both N
Qs 41 – 46 N=95			
Talked to you in a sexual way N=52	7	43	2
Showed pornography N=41	11	26	4
Touched private parts N=18	6	10	2
Made you look at their private parts or wanted to look at yours N=10	3	6	1
Made a sex video of you N=1	0	1	0
Tried to have sex with you N=17	5	12	0

While children can learn ways of protecting themselves from sexual abuse this can never eliminate the risk completely. Children must never be held responsible for any of abuse they suffer. Adults must acknowledge their responsibility to protect children. For example, parents have a role to play in protecting children by themselves avoiding talking to children in a sexual way and limiting access to pornography.

RECOMMENDATIONS:

- *Parents and the public need to be made aware of child sexual abuse and ways of protecting children;*
- *Children need to learn ways of protecting themselves and to understand they are not responsible for the abuse that happens to them.*

Chapter Five:

Children's Experiences of Violence in Institutions

The ICAST institutional questionnaire was administered to a representative sample of three hundred and one children¹⁸ living in government run institutions. This version of the questionnaire includes questions about physical and psychological violence and sexual abuse. As with the community sample the child was asked to identify the perpetrator as either another child or an adult, with the possibility of reporting violence from both. Questions regarding neglect, taken from the home questionnaire, were added as it was felt that it was important to learn about neglect experienced by the children living in institutions. The children were interviewed individually within the institutions. Through out the interview, it was emphasised that the interviewer was interested only in experiences that had occurred within the Institution so as to avoid confusion with experiences of violence that the child might have had in a different environment.

Characteristics of the Children

Table 5.1 shows the gender distribution and location of the institutions. Age distribution is shown in table 5.2.

Table 5.1 Characteristics of children

		N	%
Gender	boy	156	51.8
	girl	145	48.2
Location	Tbilisi	105	35.0
	region	195	65.0

The larger number of boys and the younger age of the children, compared to the community sample, reflects the sex and age distribution of the children living in institutions in Georgia.

Table 5.2 Age distribution of total sample (301)

Age Years	%	
	Institution	Community
11	17.6	14.4
12	18.6	14.4
13	16.9	14.2
14	14.0	14.5
15	15.0	14.3
16	10.3	14.7
17	7.0	13.6
18	0.7	0.7

¹⁸ Following data entry, it was discovered that 301 children had been interviewed. The decision was made to continue the analysis with 301 children.

All the children were able bodied as the available resources did not allow for adaptation of the research tools for use with children with disability.

RECOMMENDATION:

- *Research is needed on the abuse and neglect of children with disabilities.*

The children were asked to share their feelings about the institution. Their responses are recorded in Table 4.3 showing that most, but not all, felt safe.

Table 5.3 Children's feelings about the institution

	Always	Usually	Some -times	Never
Do you feel safe in the institution you live? q10.	80.7%	9.0%	5.0%	5.3%
Do you like to live in the institution? q10.a	68.1%	21.6%	9.0%	1.3%

Summary of Experiences

Psychological and Psychological Violence

The children's experiences of both physical and psychological violence within the institution for the last year is summarised in Table 5. 4. The children reported on experiences both for the past year and at any time since they came to live in the institution (ever). The rates were high with 71.1% reporting physical violence and 61.5% psychological violence in the last year.

Table 5.4: Summary of Children's Experiences – Physical and Psychological Violence

Children in Institutions	Physical Violence				Psychological Violence			
	Ever		Last year		Ever		Last year	
	N	%	N	%	N	%	N	%
Total N = 301	228	75.7	214	71.1	195	64.8	185	61.5

Neglect

The questions about neglect demonstrated that about a third of the children considered they had suffered neglect since they came to live in the institution (Table 5.5).

Table 5.5 Summary of Children's Experiences – Neglect

Children in Institutions	Neglect			
	Ever		Last Year	
	N	%	N	%
Total N = 301	103	34.2	97	32.2

Sexual Abuse

Table 5.6 shows the reports of sexual abuse for both the last year and since the child came to live in the institution.

Table 5.6: Summary of Children's Experiences – Sexual Abuse

Children in Institutions	Sexual Abuse			
	Ever		Last Year	
	N	%	N	%
Total N = 301	52	17.3	50	16.6

Comparison with Community Sample

The rates for all the types of violence and neglect for both the community children and the institution children are compared in Table 4.6. The children in institutions report more violence and neglect than do community children.

Table 5.8: Comparison with Community Sample

	General population N = 1050	Institution N = 301
Physical Violence	54.0%	71.1%
Psychological Violence	59.1%	61.5%
Neglect	24.8%	32.2%
Sexual Abuse	7.8%	16.6%

Only the rates for psychological violence do not reach statistical significance.

Gender and Age Differences

The differences between boys and girls for reports of violence, neglect and sexual abuse in the last year are shown in Figure 5.1. Only the reports of neglect reach statistical significance, with girls reporting more ($p=0.026$).

Figure 5.1 Experiences of violence and neglect by gender (%)

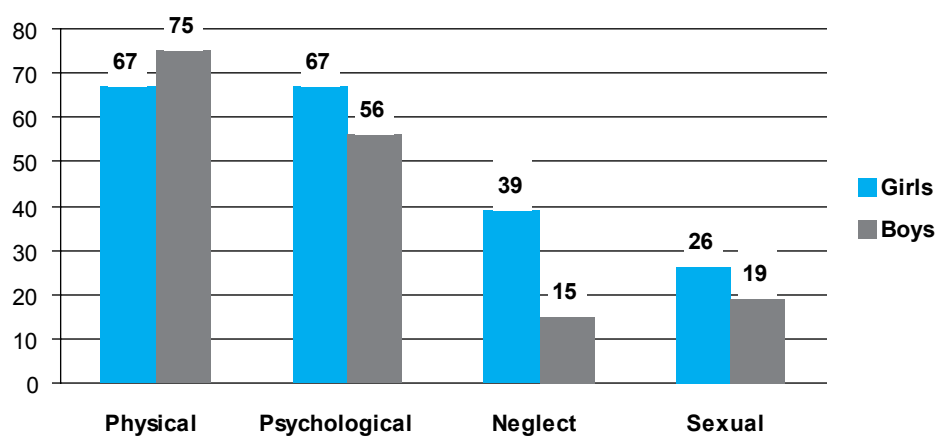
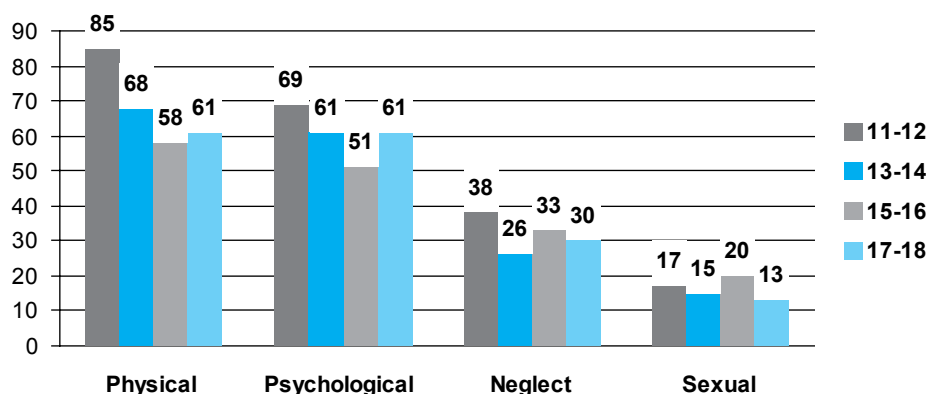


Figure 5.2 shows the differences by age. Regression analysis shows that physical violence decreased with age ($p=0.00$) with particularly high rates for the youngest age group. Bullying by older children may be one possible explanation. For neglect, while no overall trend was found, younger children were reporting the highest rates. These findings raise concerns about the way the younger child is being treated and deserves further consideration.

Figure 5.2: Children Reporting Victimisation and Neglect by Age Group



RECOMMENDATION:

- Investigate further the experiences of younger children within the institutions.

Interestingly more boys than girls reported sexual abuse although the difference does not reach statistical significance. This will be considered further when the details of the sexually abusive actions are examined.

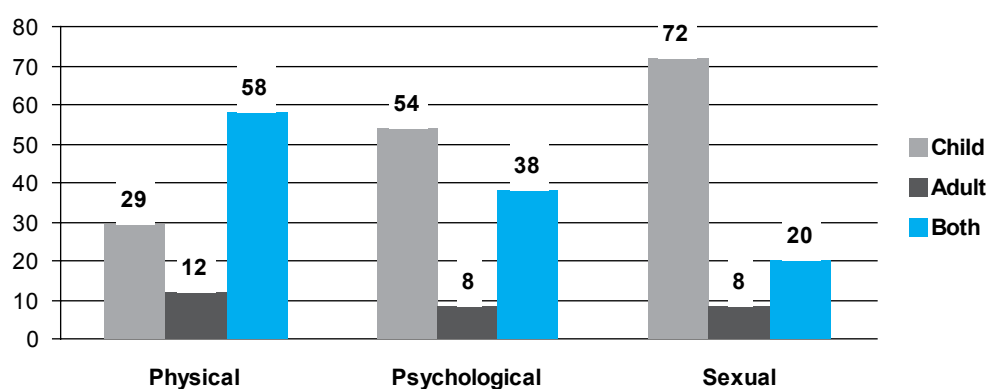
Who Perpetrated the Violence?

When all the actions, making up each category of violence or abuse, were considered together the perpetrator was more likely to be another child in the institution than an adult. Table 5.9 shows this in relation to both last year and has ever happened in the Institution. This does not necessarily mean there were not individual acts of violence more often perpetrated by an adult than a child. We examine this further, together with the implications. The percentages represent the total number of children reporting a type of violence. Thus of the 63 children reporting physical violence in the last year, 29.4% reported that they had been victimised on one or more occasions by another child, 12.1% by an adult, and 58.4% by both a child and an adult. Table 5.9 gives this information for both the last year and for ever, while Figure 5.4 represents the finding of the last year only.

Table 5.9: Perpetrators for Ever and Last Year

	Ever							Last Year						
	Total (100%)	Perpetrator						Total (100%)	Perpetrator					
		Child		Adult		Both			Child		Adult		Both	
		N	%	N	%	N	%	N	N	%	N	%	N	%
Physical Violence	228	67	29.4	33	14.5	128	56.1	214	63	29.4	26	12.1	125	58.4
Psychological Violence	195	105	53.8	19	9.7	71	36.4	185	100	54.1	15	8.1	70	37.8
Sexual abuse	52	38	73.1	4	7.7	10	19.1	50	36	72.0	4	8.0	10	20.0

Figure 5.3: Perpetrators (%) for Last Year



Details of Violence

Physical Violence

Table 5.10 gives details of the physical violence ever experienced by the children since coming to live in the institution together with the perpetrator (who could be another child or an adult in the institution). For each action the table records the number of children experiencing the action by perpetrator. Thus 109 children reported having been slapped on the arm, of which 11% reported this was done on one or more occasions by an adult, while 75.2% said they had been slapped by another child and 13.8% by both another child and an adult.

Table 5.10 details of physical violence actions with perpetrator.

Physical punishment	Ever		Perpetrator					
			adult		child		both	
	N	%	N	%	N	%	N	%
Total	228	75.7	33	14.5	67	29.4	128	56.1
Action								
Twisted ear q14	130	43.2	113	86.9	6	4.6	11	8.5
Slapped hand or arm q13	109	36.2	12	11.0	82	75.2	15	13.8
Slap head or face q12	96	31.2	28	29.1	50	52.1	18	18.8
Pulled hair q15	81	26.9	36	44.4	30	37.1	15	18.5
Kicked you q18	79	26.2	0	0	79	100	0	0
Hit you q17	71	23.6	2	2.9	69	97.1	0	0
Anyone hurt you q11	60	19.9	5	8.3	5	8.3	50	83.4
Thrown object at you q16	53	17.6	4	7.5	49	92.5	0	0
Crushed your fingers q19	40	13.3	5	12.5	35	87.5	0	0
Stand/kneel for punishment q21	25	8.3	3	12.0	22	88.0	0	0
Washed mouth with soap or pepper q20	15	5.0	1	6.67	14	93.3	0	0
Tried to choke you q27	14	4.7	0	0	14	100	0	0
Tied you up q28	14	4.7	2	14.3	12	85.8	0	0
Forced you to do something dangerous q26	10	3.3	2	20	8	80	0	0
Stay out in cold or heat for punishment q22	7	2.3	6	85.7	0	0	1	14.3
Burnt you q23	3	1.0	0	0	3	100	0	0
Cut you with sharp object q29	5	1.7	2	40	3	60	0	0
Taken food away q25	4	1.3	3	75	1	25	0	0
Put you in cold or hot water q24	1	0.3	0	0	1	100	0	0

This table demonstrates that there are some actions where a higher percentage of the actions were carried out by an adult than another child. The most extreme example is ear twisting where an adult was cited 124 times as carrying out the action; while children were cited as carrying it out 17 times. Adults were also implicated in a variety of other physical punishments, some of which could cause injury. The numbers are small, however, still warrants concern given that physical punishment is “officially” banned in residential institutions in Georgia (Ending Legalised Violence Against Children: Global Report 2007).

RECOMMENDATIONS:

- Staff in residential institutions need additional training in children’s rights and methods of discipline that do not involve physical violence;
- Children in residential institutions should have access to the same referral and assessment services for investigation and treatment of abuse as children in the community;
- The Institution requires its own protocol (policy and procedures) on identification and management of suspected abuse;
- Staff should be screened for a history of violence against children;
- There should be an independent person (advocate) to whom children and staff can go to initially confidential advice if abuse is suspected.

Where adults are using violence towards the children it is not surprising that the children interact violently with each other. It is clear from the reports that a lot of slapping pushing etc. does go on between children in institutions. This is more likely to happen when the children are not engaged in well supervised constructive activities. In the words of one of the parents asked about how to manage children's behaviour "keep them busy"

RECOMMENDATIONS:

- Ensure that the children have access to well supervised and constructive out of school activities;
- Children should be actively encouraged and supported in finding non violent ways of conflict resolution. Staff will require training in conflict management to undertake this task;
- A code of Conduct (Behaviour) for both adults and children should be developed within the Institution to make it clear that interpersonal violence is not acceptable.

Psychological Violence

The details of the different psychological violence actions are given in Table 5.11 with details of the perpetrator. For all actions included here another child is more frequently identified as the perpetrator.

Table 5.11: Psychological violence actions with perpetrator

Psychological punishment	Ever		Perpetrator					
			adult		child		both	
	N	%	N	%	N	%	N	%
Total	195	64.8						
Action								
Call you rude or hurtful names q33	101	33.6	11	10.9	77	76.2	13	12.9
Swore at you q30	93	30.9	28	30.1	52	55.9	13	4.0
Steal from you or break belongings q40	87	28.9	2	2.3	83	95.4	2	2.3
Shouted at you q32	69	22.9	25	36.2	26	37.7	18	26.1
Insulted you q31	50	16.6	3	6.0	35	70.0	12	24.0
Make you feel stupid q34	30	10.0	8	26.7	19	63.3	3	10
Hurtful prejudice (gender, ethnicity, etc) q35	24	8.0	2	8.3	22	91.7	0	0
Hurtful prejudice against health problem q36	24	8.0	3	12.5	21	87.5	0	0
Embarrass you b/c you are an orphan q38	19	6.4	4	21.5	14	73.7	1	5.3
Embarrass you b/c you are poor q39	19	6.3	2	10.5	17	89.5	0	0
Isolate you q37	16	5.3	3	18.8	13	81.2	0	0

The most common actions are similar to those reported by the community children; using derogatory names, swearing and shouting. Once again, some adults are identified as using these techniques, which will influence the ethos of the institution and make it difficult for other staff members to encourage children to not to be verbally unpleasant to each other. Included in the set of questions is one about belongings, and it will be seen that 87 of the 300 children reported having belongings broken or stolen. Most of the perpetrators were, as one would expect, other

children. For children who own very little, having something broken or stolen is likely to be an upsetting experience.

RECOMMENDATIONS:

- Staff require training on the effects of psychological punishment on children's self esteem and emotional wellbeing;
- The codes of conduct for both staff and children should include the prohibition of psychological violence;
- Cases of severe and/or persistent psychological violence should be covered by the child protection protocol.

Neglect

These questions were added to the ICAST questionnaire because of a local wish to give children in institutions the opportunity to report on their perceptions of any neglect they considered they had suffered while living in the Institution. The questions used were identical to those in the Community questionnaire and as has been noted above (table 5.8) significantly more children in the Institutions reported neglect in the last year. Within the Institutional sample significantly more girls than boys reported neglect.

Table 5.12: Experiences of neglect

Neglect	Ever		Last Year	
	N	%	N	%
Total (N= 301)	103	34,2	97	32,2
Type of Neglect				
Inadequate support/help q31 (CH)	48	15.9	43	14.3
Felt unimportant q30 (CH)	41	13.6	39	13.0
Went hungry or thirsty q26 (CH)	41	13.6	36	12.0
Felt not cared for q29 (CH)	24	8.0	21	7.0
Inadequate clothes q27 CH	23	7.6	18	6.0
Unmet medical need q28 (CH)	9	3.0	4	1.3

Table 5.12 outlines the children's observations both for last year and has happened ever. Most of the neglect reported would seem to be ongoing, and relates not so much to physical provision (clothes, medical care) as to emotional neglect with children feeling unsupported and unimportant; feelings that will not help the child's feeling of self esteem and self worth. When combined with some of the experiences described under the psychological violence section the outlook for a child's future psychological wellbeing is grim. Recommendations for preventing such an outcome are out side the remit of this research but clearly require attention from researchers, policy makers and educators.

RECOMMENDATION:

- Research into the origins and consequences of feelings of neglect experienced by children living in institutions needs to be conducted. This research should lead to the establishment of a strategy that prevent such neglect and its aftermath.

Sexual Abuse

Sexual abuse was reported as having occurred at some time during the time they were living in the institution by 17.3% of the children, with slightly more boys reporting experiences than girls (not statistically significant). The reason for the higher incidence of boys may be that the most commonly reported “abuse” was being shown pornography. Once again the questionnaire made it clear that the experiences to be reported were things the child did not want to happen.

Table 5.13: Experiences of sexual abuse with perpetrator

Sexual Abuse	Ever		Perpetrator					
			Adult		Child		Both	
	n	%	n	%	n	%	n	%
Total	52	17.3						
Action								
Showed you pornography q43	39	13.0	3	7.7	34	87.2	2	5.1
Unwanted kiss q51	15	5.0	1	6.6	1	6.6	13	86.8
Touch you in a sexual way that made you uncomfortable q42	11	3.7	0	0	11	100	0	0
Made you take off clothes q44	9	3.0	0	0	4	44.4	5	55.6
Take their own clothes off when they shouldn't have q45	9	3.0	1	11.1	7	77.8	1	11.1
Unwanted touch to private parts q48	5	1.7	1	20	4	80	0	0
Made you have sex with them q46	4	1.3	1	25	3	75	0	0
Made you touch their private parts q47	4	1.3	1	25	3	75	0	0
Gave you money for sexual things q49	2	0.7	0	0	2	100	0	0
Involved you in making pornography q50	0	0	0	0	0	0	0	0

Most of the sexual abuse within the institution was perpetrated by another child, raising concerns, as with the community children, about the possibility of children continuing to behave in a sexually inappropriate way in adult life. Examples of inappropriate sexual behaviour by an adult were uncommon but none are acceptable. They included kissing, taking off clothes, and in one case, having sex with a child.

RECOMMENDATIONS:

- *Sexual abuse by both adult and another child should be covered by the Institution's Child Protection Policy and the children should have access to the Child Protection System and services;*
- *The Institution's code of conduct should include prohibiting sexually inappropriate behaviour;*
- *Staff should be screened prior to employment for previous allegations of sexual abuse. Where allegations are substantiated, the adult should never again be allowed to work with children;*
- *Children who are abusing other children should be identified, assessed and provided with necessary services as should their victims;*
- *As with other forms of violence, children and staff should have access to an independent person with whom they can confidentially discuss concerns about themselves or others.*

ADDITIONAL RECOMMENDATIONS:

- All the above recommendations would be facilitated by the appointment, within each institution, of a named person for child abuse and neglect. Such an individual should receive additional training and assume the responsibility for coordinating the development and implementation of the Child Protection Policy and Codes of Conduct within the Institution. They would also provide (or organise) training for other staff and children on the identification of abuse and would serve as a link to the local community's Child Protection System (referral and assessment);
- The Social Welfare System should develop a method for monitoring institutions and collecting data on allegations of abuse. For complex cases it may be necessary to have a system for providing advice to the Directors of Institutions and helping with investigations;
- Consideration should be given to adapting the Safe Schools Policy and Strategy for implementation in institutions.

Chapter Six:

Children's Experiences of Violence in School

In phase two of the National Study, 1,300 children from 93 schools were interviewed about their experiences of violence in school. The same version of the ICAST (CI) questionnaire as had been administered to the children in institutions was used. To provide additional information for the MoES Safe School Initiative, two additional pages of questions on school climate including attitudes, location, and timing of bullying and peer violence were added. These additions were intended not only to assess such practical aspects of school violence as common times and locations, but also to provide a more general sense of how the children felt about their school, their safety, involvement of parents, and attitudes of teachers.

Children were interviewed individually in schools. Six of the selected children chose not to participate, but all of those who agreed to participate completed the interviews and answered all the questions. A total of 1300 interviews were completed with 6 refusals giving a response rate of 99.5%.

The results are presented in two sections. The first gives the results of the ICAST questionnaire and the second those from the school climate questions.

Characteristics of the Children

Gender and location by region of the children is given in Table 6.1. Table 6.2 shows the age distribution of the total sample.

Table 6.1: Characteristics of children (1,300)

		N	%
Gender	Boy	645	49.6
	Girl	655	50.4
Location	Tbilisi	347	26.7
	Region	953	73.3
	Urban	727	55.9
	Rural	573	44.1

Table 6.2 Age distribution of total sample (1,300)

Age Years	N	%
10	108	8.3
11	179	13.8
12	200	15.4
13	180	13.8
14	193	14.8
15	168	12.9
16	198	15.2
17	74	5.7

Half of the interviewed children were boys and half of them were girls. Nearly three quarters of the children lived outside of Tbilisi, and over half were urban residents. Age was well distributed throughout the 6 grade levels surveyed, with fewer children age 10 and 17 reflecting the grouping of ages by grade e.g. the 11th grade is a mixture of 16 and 17 year olds

Most of the children and young people reported living with both parents, while only 4.9% of the total sample reported living without a mother and 14.8% without a father.

Results from ICAST Questionnaire

Summary of Experiences

The children were asked to share their feelings about the school. Their responses are recorded in Table 6.3 showing that most, but not all, felt safe.

Table 6.3: Children's feelings about the school

	Always	Usually	Sometimes	Never
Do you feel safe at school q10.	77.5%	17.2%	3.9%	1.4%
Do you like to go to school q10.a	66.7%	24.2%	8.6%	0.5%

The majority of children and young people reported that they felt safe at school. Most of the children (77.5%) said they always feel safe while 17.2% reported usually feel safe. Few (1.4%) reported never feeling safe at school or only feeling safe only sometimes (3.9%). Most of those interviewed said that they like to go to school always (66.7%), or usually (24.2%), and only 0.5% of children and young people reported that they never liked to go to school. Thus the majority of children and young people reported that they felt safe and had a positive attitude about going to school.

The children and young people were asked to report experiences in the past year and at any time in the past. Their overall responses are summarised in Table 6.4. All experiences happened in the school and directly involved the child. These are summative measures and indicate that a child reported one or more of the victimization types in that category (either for past year or ever inclusive of past year). After reporting a victimization experience, the child was asked whether another child, an adult or both carried out the action. The rates given in Table 4 include physical, psychological and sexual violence perpetrated by either an adult or another child in the school.

Table 6.4: Summary of Children's Experiences – Physical, Psychological and sexual Violence

Types of violence	last year		ever	
	N	%	N	%
Physical	612	47.1	802	61.7
Psychological	617	47.5	733	56.4
Sexual	73	5.6	95	7.3

Children and young people reported high rates of both physical and psychological victimization and bullying in the schools. The rates for sexual victimization were much lower. During the pilot testing of the ICAST CI in the four different countries, rates of reported sexual victimization in schools in the last year ranged from 8-49% with an average rate of 22%. As with previous

groups of children, the interviewers from BCG noted that during this portion of the interview, children and young people seemed most uncomfortable and had difficulty answering these questions. In contrast to the pilot testing, the study in Georgia was done with face to face interviews which provide less anonymity than pencil and paper surveys. Questions of sexual victimization may be more taboo and thus more prone to social acceptability bias than questions surrounding other types of victimization.

Gender and Age Differences

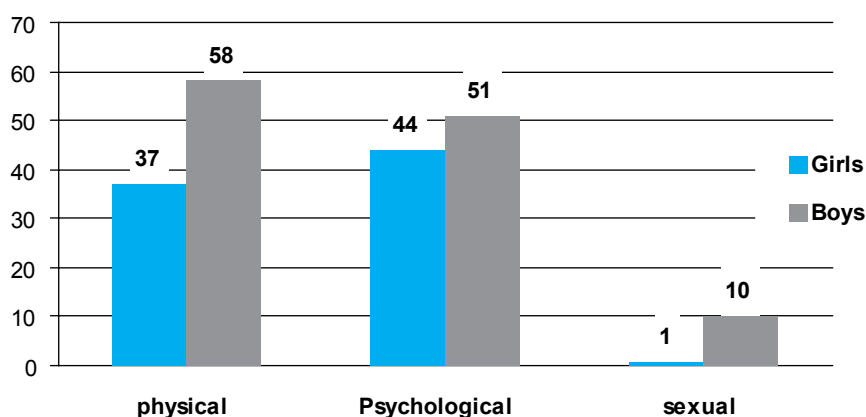
The differences between boys and girls for physical, psychological, and sexual victimization are summarised in Table 6. 5 and displayed in Figure 6.1.

Table 6.5: Summary of Children's Experiences of violence by GENDER last year

	Physical		Psychological		Sexual	
	N	%	N	%	N	%
girls N = 655	240	36.6	290	44.3	9	1.4
boys N = 645	372	57.7	327	50.7	64	9.9
Chi-square-value	57.705		5.376		44.807	
P value*	.000		.020		.000	

*significance level ≤ 0.05

Figure 6.1: Comparison by gender and types of violence last year



All of the comparisons between boys and girls reach high statistical significance; boys were more likely to report physical ($p = .00$), psychological ($p = .02$) and sexual violence ($p = .01$).

The findings for physical violence is consistent with the studies of violence in schools in most other countries in that boys, more often than girls, report physical victimization. In contrast to these findings, however, girls usually report higher rates of psychological victimization.

RECOMMENDATIONS:

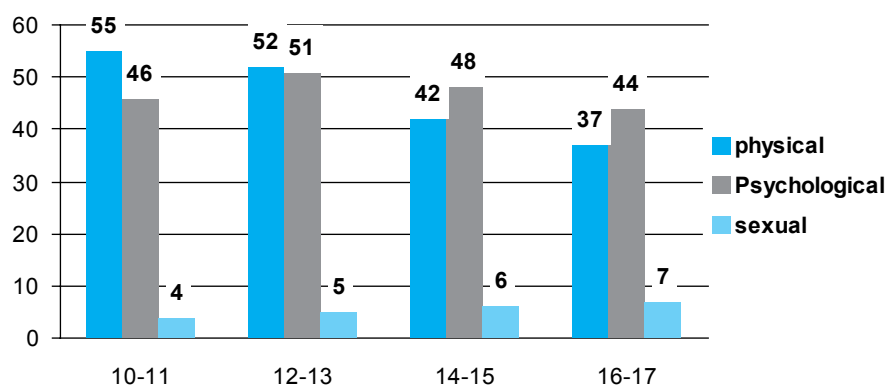
- The reasons boys are more involved in violence should be considered and links with possible gang membership explored;
- Psychological violence in schools, as in other settings must be seen as important as physical violence.

The influences of age on the experiences reported by the children are shown in Table 6.6 and demonstrated in Figure 6.2.

Table 6.6: Children reporting Physical, Psychological and Sexual Victimization by Age Group

Age group		Physical		Psychological		Sexual	
	N	N	%	N	%	N	%
10-11	287	158	55.1	132	46.0	12	4.2
12-13	380	199	52.4	192	50.5	19	5.0
14-15	361	152	42.1	173	47.9	23	6.4
16-17	272	103	37.9	120	44.1	19	7.0
R Square		.018		.000		.002	
P value		.000 ***		.517		.102	
ANOVA(b) * p<0.05, ** p<0.01, *** p<0.001							

Figure 6.2: Experience with victimization types by age



This graph and corresponding regression analysis demonstrate that physical violence declines with increasing age ($p=0.00$). Rates of psychological violence show no such trend. Rates of sexual victimization demonstrate increasing rates with age, but this association is not statistically significant. This finding may be due, in part, to the low frequency of reporting sexual victimization.

RECOMMENDATION:

- Given that the younger children are suffering higher rates of physical abuse and may also be perpetrating violence on others, strategies for identifying children at risk and intervening early should be an essential component of any violence reduction initiative.

Differences by Location

The rates of victimization by location (Tbilisi and regions as well as urban and rural) are summarized in Tables 6.7 and 6. 8 and graphically displayed in Figure 6.3

Table 6. 7: Summary of Children's Experiences of violence by Location (Tbilisi/regions)

	Physical		Psychological		Sexual	
	N	%	N	%	N	%
Tbilisi N = 347	152	43.8	148	42.7	18	5.2
Regions N = 953	460	48.3	469	49.2	55	5.8
Chi-square-value	2.035		4.392		.164	
P value	.154		.036*		.686	
* P<0.5						

Figure 6.3: Victimization Experience by Location (Tbilisi/regions)

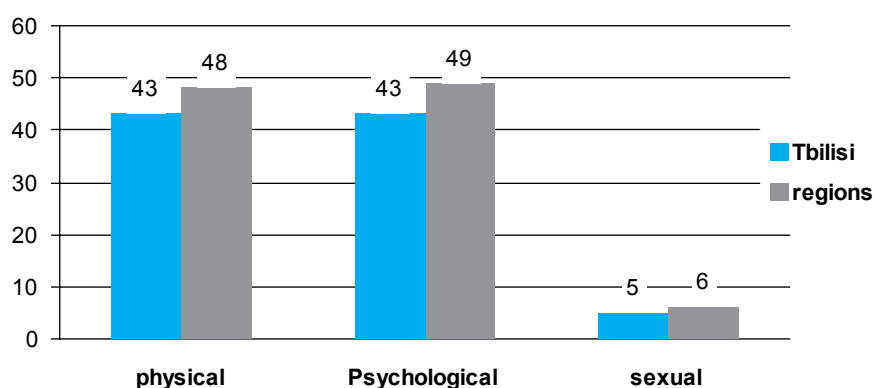


Table 6.8: Summary of Children's Experiences of violence by Location (urban/rural)

	Physical		Psychological		Sexual	
	N	%	N	%	N	%
Total	612	47.1	617	47.5	73	5.6
Urban N= 727	332	45.7	344	47.3	45	6.2
Rural N= 573	280	48.9	273	47.6	28	4.9
Chi-square value	1.316		.014		1.027	
P value	.251		.907		.311	

There were no significant differences for rates of physical and sexual violence by location when comparing students from Tbilisi and the regions but psychological violence was reported significantly more in the regions than in Tbilisi as demonstrated in Table 6.7 ($p = .036$). When comparing students from rural and urban areas, there was no significant difference in reported rates of physical, psychological, or sexual victimization.

RECOMMENDATION:

- *It will be necessary to take account of regional variation and to provide services to reduce violence on a regional basis. It is important to take account of this variation when devising national policy and strategy and in the guidance to schools that should follow.*

Differences by Economic Status

Using the same classification used in phase one (Annex 3), the children and young people were divided into three groups for economic status (high, middle, and low). Comparisons were made between the low and middle groups and the middle and high groups by percent reporting each victimization type. The per cent who reported experiences in the last year and p values are displayed below in table 6.9.

Table 6.9: Victimization by economic status (ES)
(% are from positive answers of comparing groups)

	ES	%	P value	ES	%	P value	ES	%	P value
Physical	Low	48.0	.689	Middle	44.6	.189	Low	48.0	.737
	Middle	44.6		High	51.5		High	51.5	
Psychological	Low	46.6	.872	Middle	45.1	.174	Low	46.6	.556
	Middle	45.1		High	52.3		High	52.3	
Sexual	Low	3.4	.527	Middle	5.1	.149	Low	3.4	.113
	Middle	5.1		High	7.4		High	7.4	

There was no significant difference demonstrating that economic class does not predict the reporting of physical, sexual, or psychological violence in the schools. This is in contrast to other studies which have shown more reported violence among school children of lower economic status.

Differences of Living with or without Parents

School victimization by type was assessed for children and young people living with both parents compared to children and young people living without one or both parents.

Table 6.10: Differences by living with and without parents and types of violence

	Physical		Psychological		Sexual	
	N	%	N	%	N	%
Total	612	47.1 %	617	47.5 %	73	5.6 %
With both parents N = 1083	505	46.6 %	511	47.2 %	61	5.6 %
Without one or both parents N = 217	107	49.3 %	106	48.8 %	12	5.5 %
P value	.471		.654		.952	

No significant differences were found between children and young people with both parents and without one or both parents by any type of violence.

Perpetrators of Violence

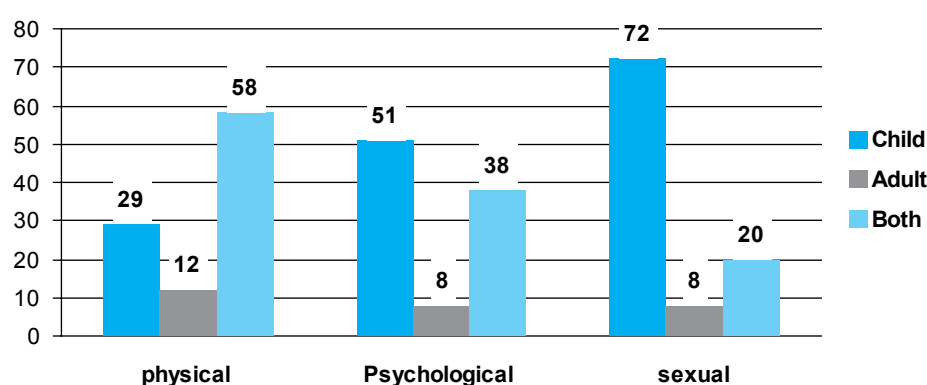
Children and young people were asked if the violence was committed by another child, an adult, or both. They reported who the perpetrators were according to type of violence in both the last year or in their lifetimes as a whole. The results are shown in Table 6.11. and Figure 6.4.

Table 6.11: Perpetrators for Ever and Last Year by Type of Violence

	Ever						Last Year					
	Perpetrator						Perpetrator					
	Adult		Child		Both		Adult		Child		Both	
	N	%	N	%	N	%	N	%	N	%	N	%
Physical Violence	199	24.8	255	31.8	348	26.8	131	21.4	213	34.8	268	43.8
Psych.*	197	26.9	198	27.0	338	26.0	164	26.6	142	23.0	311	50.4
Sexual abuse	10	10.5	81	85.3	4	.3	5	6.8	64	87.7	4	5.5

* Omits Question 25 – bullied by another child as 100% perpetrators will be another child

Figure 6.4: Perpetrators for Last Year by Type of Violence



While children and young people reported other children and young people as the most common perpetrators of physical, psychological, and sexual violence they also often reported adults as perpetrators of physical and psychological violence.

RECOMMENDATIONS:

- *School-based violence prevention programmes should recognise the important role that any adults in school can play as perpetrators of violence against children and young people;*
- *Use of physical and psychological victimization by adults must be specifically prohibited;*
- *Schools should ensure that all school staff are trained in how to behave towards children and young people without recourse to violence and how to provide role models for children and young people that embody non-violent behaviour at all times;.*
- *It will be important that school policy and strategy to reduce violence includes training for all school staff and establishes standards of expectation in codes of conduct that apply to all members of the school community*

Details of Violence

Frequencies for each specific victimization type were calculated both for the “last year” and for “ever”. For each type of victimization the perpetrators were identified. As one would expect, the rates for “ever” were higher for each victimization type, since they include the past year. However, the general pattern of the types of victimization behaviour, their frequency, and perpetrator, are essentially consistent and therefore the results presented in the subsequent tables focus on the last year. The types of victimization are displayed by descending order of frequency. The tables also show the perpetrator by specific victimization.

Physical Violence

Table 6.12 gives details of physically violent actions reported by the children for the last year together with perpetrator.

Table 6.12: Details of physical violence actions with perpetrators LAST YEAR

Physical Violence	LAST YEAR		Perpetrator					
			adult		child		both	
	N	%	N	%	N	%	N	%
Slap hand or arm q13	267	20.5	37	13.9	211	79.0	19	7.1
Twist ear q14	226	17.4	191	84.5	25	11.1	10	4.4
Pull hair q15	223	17.2	127	57.0	76	34.1	20	9.0
Anyone hurt you q11	171	13.2	16	9.4	148	86.5	7	4.1
Slap head or face q12	134	10.3	39	29.1	91	67.9	4	3.0
Kick you q18	123	9.5	4	3.3	115	93.5	4	3.3
Throw object at you q16	112	8.6	10	8.9	98	87.5	4	3.6
Hit you q17	109	8.4	4	3.7	104	95.4	1	.9
Crush fingers q19	83	6.4	6	7.2	75	90.4	2	2.4
Stay out in cold or heat water q22	32	2.5	29	90.6	3	9.4	.	.
Stand/kneel for punishment q21	30	2.3	27	90.0	2	6.7	1	3.3
Forced to do something dangerous q26	26	2.0	10	38.5	16	61.5	.	.
Take food away q25	14	1.1	3	21.4	11	78.6	.	.
Choke you q27	14	1.1	.	.	13	92.9	1	7.1
Cut you with sharp object q29	6	0.5	1	16.7	5	83.3	.	.
Tie you up q28	5	0.4	.	.	5	100.0	.	.
Wash mouth with soap or pepper q20	4	0.3	1	25.0	3	75.0	.	.
Put you in cold or hot water q24	2	0.2	.	.	2	100.0	.	.
Burn q23	0	0.0	.	.	.	.	.	.

In the last year, children and young people most commonly reported experiencing slapping on the hand or arm, twisting of the ear, pulling hair, being hurt and being slapped on the head or face. Severe forms of physical violence, such as crushing fingers, cutting, choking, burning, were not commonly reported.

Adults in schools commonly used punishments, such as twisting ears (88.9% of 226) and pulling hair (56.0% of 223).

Perpetrators of other actions were more commonly children: slapping hand or arm (86.1% of 267); hurting physically (90.6% of 171); kicking (96.8% of 123); hitting (96.3% of 109); crushing fingers (92.8% of 83); slapping on head or face (70.9% of 134); or forcing to do something dangerous (61.5% of 26).

RECOMMENDATION:

- A process should be in place to allow the reporting and investigation of cases of suspected abuse by teachers and other adults working within schools.

Psychological Violence

Table 6.13 displays frequencies for specific psychological victimization behaviors for 'last year' in descending order of frequency and by perpetrator.

Table 6.13 Details of psychological violent actions with perpetrators LAST YEAR

Psychological Violence	LAST YEAR		perpetrator					
			adult		child		both	
	N	%	N	%	N	%	N	%
Shouted at you q32	262	20.2	162	61.8	70	26.7	30	11.5
Sworn at you q30	236	18.2	126	53.4	80	33.9	30	12.7
Threatened you with bad marks q41	232	17.8	217	93.5	11	4.7	4	1.7
Call you rude or hurtful names q33	197	15.2	33	16.8	141	71.6	23	11.7
Insulted you q31	178	13.7	50	28.1	97	54.5	31	17.4
Make you feel stupid q34	145	11.2	79	54.5	56	38.6	10	6.9
Steal from you or break belongings q40	137	10.5	7	5.1	123	89.8	7	5.1
Isolate you q37	64	4.9	20	31.3	41	64.1	3	4.7
Hurtful prejudice(gender, ethnicity, etc) q35	34	2.6	4	11.8	28	82.4	2	5.9
Hurtful prejudice against health problem q36	26	2.0	12	46.2	14	53.8	.	.
Embarrass you b/c you are poor q39	22	1.7	1	4.5	19	86.4	2	9.1
Embarrass you b/c you are an orphan q38	3	0.2	.	.	3	100.0	.	.

The most common types of psychological victimization are shouting, swearing, threatening with bad marks, calling names, insults, making you feel stupid, and stealing your belongings. Typical acts of psychological violence for adults are shouting (73.3% of 262); swearing (66.1% of 236), and threatening with bad marks (95.2% of 232).

Another child is more frequently identified as the perpetrator for name calling (83.3% from 197); stealing belongings (94.9% from 137); and isolating a child (68.8% from 64).

RECOMMENDATIONS:

- Psychological victimisation should be taken as seriously as physical violence by those designing violence prevention policies and strategies;
- Both adults and children within schools should be made more aware of the effects of psychological victimisation.

Sexual Abuse

Table 6.14 shows frequencies for specific sexual victimization behaviors for the last year in descending order of frequency and by perpetrator.

Table 6.14: Details of sexual violence actions with perpetrators LAST YEAR

Sexual violence	LAST YEAR		perpetrator					
			adult		child		both	
	N	%	N	%	N	%	N	%
Showed you pornography q43	59	4.5	4	6.8	52	88.1	3	5.1
Unwanted kiss q51	11	0.8	2	18.2	9	81.8	.	.
Touch you in a sexual way q42	8	0.6	1	12.5	7	87.5	.	.
Take their own clothes off q45	4	0.3	.	.	4	100.0	.	.
Made you take off clothes q44	3	0.2	1	33.3	2	66.7	.	.
Made you touch their private parts q47	1	0.1	.	.	1	100.0	.	.
Unwanted touch to private parts q48	1	0.1	.	.	1	100.0	.	.
Involved you in making pornography q50	1	0.1	.	.	1	100.0	.	.
Made you have sex with them q46	0	0.0	.	.	.	.	.	.
Gave you money for sexual things q49	0	0.0	.	.	.	.	.	.

The vast majority of perpetrators for all types of sexual violence were children and young people, with the showing of pornography (4.5%) and unwanted kissing (0.8%) being the most common victimizing behaviours. Sexual touching, removal of clothes, and use in the production of pornography were all reported rarely. Very few adults were implicated in sexually inappropriate behaviour, which must be seen as a positive finding in relation to violence within schools.

Comparison of Violence Between Different Study Settings

Using data from the other parts of the completed study on childhood violence in Georgia it is possible to compare the rates of child reported violence in the home, school, and residential institutions. The following table and figure makes such comparisons by type of violence.

Table 6.15: Comparisons of violence between school, home and institution by type of violence

	Home (Community) (N = 1050)	School (N = 1300)	P value
Physical	54.0%	47.1%	0.0009***
Psychological	59.1%	47.5%	0.0001***
Sexual	7.8%	5.6%	0.0550
	Institutions(N = 301)	School (N = 1300)	P value
Physical	71.1%	47.1%	0.0001***
Psychological	61.5%	47.5%	0.0001***
Sexual	16.6%	5.6%	0.0001***

When comparing schools and institutions, reports for all types of violence are significantly higher for children in institutions ($p = <0001$) than they are in schools. Children and young people in Georgia experience more physical violence and sexual abuse within residential institutions than

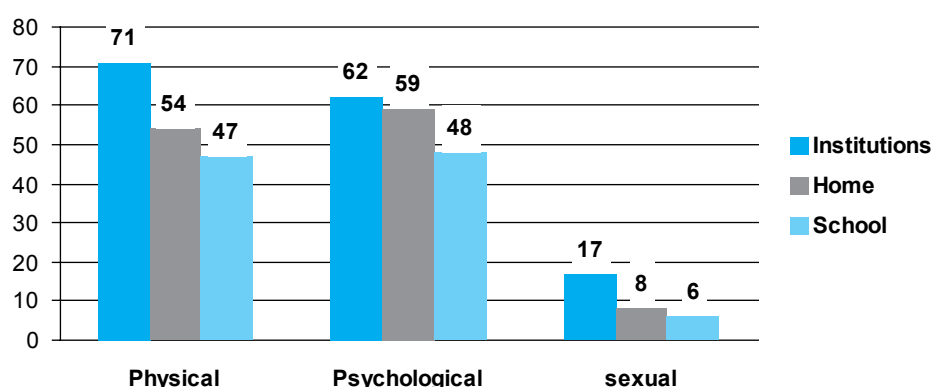
they do either at home or in school. They also suffer more psychological violence within institutions than in school.

Significantly more children report experiences of physical violence in the home compared with school ($p=0.0009$). This finding is also true for psychological violence ($p=0.0001$). The reports of sexual abuse are not significantly different between home and school.

Thus while school violence is an important component of the violence experienced by children in Georgia, they report higher rates of violence within the home and in residential institutions.

These findings are in line with the results of surveys from other countries and indicate that usually schools are safer places for children and young people than other locations in society. There is no cause for complacency but schools should take some credit for this.

Figure 6.5: Comparisons of violence between school, home and institution by type of violence



These results are further evidence that schools should work in partnership with the family in the drive to reduce violence towards and among children and young people. For children who are at risk of enduring violence in the home or within a residential institution, school will seem a safe place. This can mean they will try to share their experiences and fears with adults in a school environment.

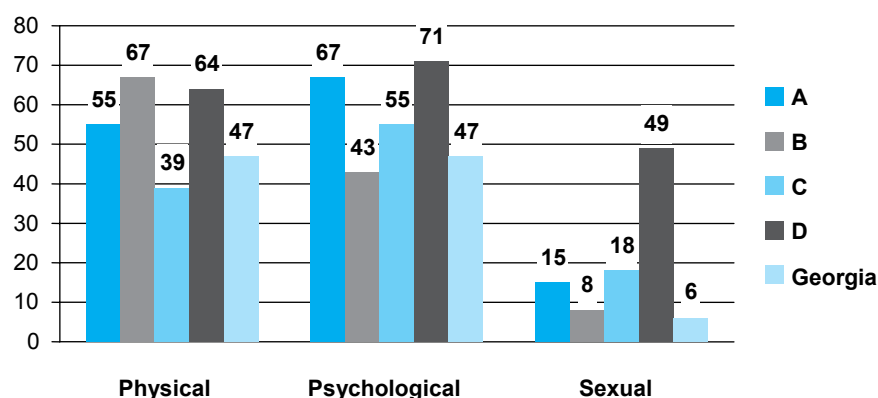
RECOMMENDATIONS:

- Reduction of violence in schools should be seen as one facet of a more general drive to reduce violence against and between children;
- Parents must be included in any partnerships developed to reduce violence;
- School staff need to be willing and able to respond to disclosures from children of their experiences of violence in the home and other settings.

International comparisons

To set the findings of this study in the context of global research on school violence, figure 6.6 has been included to demonstrate the rates of violence in the last year by type in the four school pilot studies of the ICAST CI. It should be noted that these are small studies using convenience samples of school students.

Figure 6.6 International Comparisons
(% of children in each country reporting violence in Schools)



A N = 110; B N = 122; C N = 111; D N = 122

This figure shows that the rates of reported school physical and psychological violence are similar to those reported in the pilot studies, while the rates of reported sexual violence are somewhat lower. As mentioned earlier, the pilot studies were constructed in Iceland, India, Columbia, and Russia. They are not identified in the chart to avoid misleading comparison by individual countries given the small and non-representative samples.

Results from School Climate Questionnaire

Questions were grouped into the following blocks: attitudes toward school, relationships between students, treatment by teachers, and position of parents. Also, two additional blocks of questions studied children and young people's assessment of the frequency of bullying according to place and time.

Attitudes and Relationships

All questions of attitudes were formed in a positive manner with the exception of three questions in the first block, which were posed in a negative manner - "The students are treated too severely/strictly in this school"; "there are many things about school I do not like"; "I wish I didn't have to go to school". In order to calculate the mean of this block, we recoded these questions. Therefore, a higher mean score in every block reflects a more positive attitude in that domain.

Attitudes to school

Table 6.16 presents the responses of the children and young people to the questions designed to assess their attitudes to school. It will be seen that the average score for positively expressed items was generally high, reflecting high agreement with these positive attitudes towards school. By contrast, the negatively posed questions were more often neutral or agreed with, reflecting a less positive attitude toward school. Never the less the overall picture is a positive one.

Table 6.16: Attitudes towards school

	means*
Attitudes toward school	3.6
The students are treated too severely/strictly in this school	3.62(after recoding 2.38**)
The rules in this school are fair	4.03
Our school is a nice place to be	4.23
I feel I belong at this school	4.20
I feel safe at this school	4.21
I look forward to going to school	4.08
I like being in school	4.16
There are many things about school I do not like	3.29(after recoding 2.71**)
I wish I didn't have to go to school	3.98 (after recoding 2.02**)

* 5 - Strongly agree, 4 - Agree, 3 - Neither agree nor disagree, 2 - Disagree, 1 Strongly Disagree

** For calculating of means questions with negative meanings were reverse coded

Relationship between Students

Students generally endorse positive relationships with peers, indicating an enjoyable, helping, and supportive school environment (Table 6.17).

Table 6.17: Relationships between Students

	Means
Relationships between students	4.4
The students in my class(es) enjoy being together	4.40
Most of the students in my class(es) are kind and helpful	4.37
When a student in my class(es) is feeling down, someone else in class tries to help	4.32

Treatment by Teachers

Students generally reported that teachers treated them well and were supportive (Table 6.18), though they seem to report less positively about their teachers than about their peers. This is despite having previously reported more violence originating from other children than from teachers.

Table 6.18: Treatment by Teachers

	Means
Treatment of teachers	4.0
I am encouraged to express my own views in my class(es)	3.93
Our teachers treat us fairly	4.08
When I need extra help, I can get it	4.11
My teachers are interested in me as a person	3.66
Most of my teachers are friendly	4.09

Position of Parents

Students reported that their parents had a high level of interest, involvement, and were willing to be helpful with regard to the school, teachers, and the child's education (Table 6.19). This is another positive finding and an indication that parents are likely to be involved in violence prevention and reduction initiatives within schools.

Table 6.19: Position of Parents

	Means
Position of parents	4.3
If I have a problem at school, my parents are ready to help	4.41
My parents are willing to come to school to talk to teachers	4.25
My parents encourage me to do well at school	4.48
My parents are interested in what happens to me at school	4.37
My parents are willing to help me with my home work	3.90

RECOMMENDATION:

- Those implementing violence reduction policies and strategies within schools should proactively seek parental participation.

Summary of Attitudes

Table 6.20 demonstrates that, overall, children's attitudes towards the issues connected to school are positive. The lowest reported score is for attitudes toward school, which is largely driven by the three negative questions that were posed. Children and young people tended to agree with the negative or positive content of these questions.

Table 6.20: Summary of Attitudes

Children's attitudes	Means
Attitudes toward school	3.6
Relationships between students	4.4
Treatment by teachers	4.0
Position of parents	4.3

It is important to build on these strengths in schools in Georgia when developing a National Policy and Strategy. Schools should be congratulated and encouraged to recognise their success in creating positive attitudes to school and in promoting positive relationships. Identification of the strengths that can be built on is as important as the recognition of areas for improvement when designing and implementing violence reduction programmes.

RECOMMENDATION:

- Existing positive attitudes within schools should form the foundation of any violence reduction policy and strategy.*

Gender and Age Differences

Table 6.21 compares attitudes by gender.

Table 6.21: Comparison of children's attitudes by gender (t-test)

Children's attitudes	gender	N	Mean	Std. Deviation	P value
Attitudes toward school	girls	655	3.565	.3276	.373
	boys	645	3.549	.3484	
Relationships between students	girls	655	4.341	.6412	.227
	boys	645	4.383	.6122	
Treatment of teachers	girls	655	3.997	.6031	.177
	boys	645	3.951	.6214	
Position of parents	girls	655	4.312	.5349	.048*
	boys	645	4.251	.5666	

* $P < 0.05$

Girls more positively assess parents' readiness for helping and supporting with school problems and issues ($p = .048$). There are no other differences by gender for other measures of attitude.

When it comes to age differences (Table 6.22) regression analysis shows that only assessment of position of parents depends on the age. ($p = .000$). Older children report less involvement of parents in their school and education than younger children.

Table 6.22: Comparison of regression models predicting age

Children's attitudes	ages	means	R Square	P value
Attitudes toward school	10-11	3.570	.000	.956
	12-13	3.546		
	14-15	3.547		
	16-17	3.572		
Relationships between students	10-11	4.364	.000	.682
	12-13	4.348		
	14-15	4.362		
	16-17	4.381		
Treatment by teachers	10-11	4.017	.002	.139
	12-13	4.001		
	14-15	3.914		
	16-17	3.974		
Position of parents	10-11	4.374	.016	.000***
	12-13	4.323		
	14-15	4.238		
	16-17	4.186		

*** $P < 0.001$

Location and Socio-economic Differences

Table 6.23 compares the difference between Tbilisi and the regions, and Table 6.24 looks at the differences between rural and urban children.

Table 6.23: Comparison of children's attitudes by location – Tbilisi –region (t-test)

Children’s attitudes	location	N	Mean	Std. Deviation	P value
Attitudes toward school	Tbilisi regions	347	3.499	.3375	.000***
		953	3.578	.3360	
Relationships between students	Tbilisi regions	347	4.266	.6187	.001***
		953	4.397	.6268	
Treatment by teachers	Tbilisi regions	347	3.920	.6386	.005**
		953	3.994	.6018	
Position of parents	Tbilisi regions	347	4.276	.5205	.809
		953	4.284	.5626	
** P<0.01 *** P<0.001					

In the regions outside of Tbilisi, children and young people reported more positive attitudes toward school ($p=.000$), more positive assessment of relationships between students ($p=.001$), and better treatment by teachers ($p=.005$). There was no significant difference between Tbilisi and the regions in position of parents.

Table 6.24: Comparison of children's attitudes by location –urban –rural (t-test)

Children’s attitudes	urban - rural	N	Mean	Std. Deviation	P value
Attitudes toward school	urban	727	3.545	.3567	.140
	rural	573	3.572	.3126	
Relationships between students	urban	727	4.350	.6544	.414
	rural	573	4.378	.5908	
Treatment by teachers	urban	727	3.971	.6444	.808
	rural	573	3.979	.5699	
Position of parents	urban	727	4.317	.5459	.009**
	rural	573	4.237	.5557	
**P<0.01					

In comparison between urban and rural schools, there was a significant difference in the assessments of the position of parents. In urban schools, children and young people more positively assessed parents' readiness for helping and supporting with school issues ($p=.009$). There are no other significant differences by urban/rural in the measurement of attitudes.

Table 6.25 looks at differences by economic status.

Table 6.25: Differences by economic status

	Economic status (N)	Mean	P values	Economic status (n)	Mean	P values	Economic status (N)	Mean	P values
Attitudes toward school	Low (148) Middle(762)	3.573 3.558	.619	Low(148) High(390)	3.573 3.550	.471	Middle(762) High (390)	3.558 3.550	.700
Relationships between students	Low Middle	4.381 4.357	.647	Low High	4.381 4.367	.803	Middle High	4.357 4.367	.792
Treatment by teachers	Low Middle	3.978 3.986	.894	Low High	3.978 3.950	.650	Middle High	3.986 3.950	.345
Position of parents	Low Middle	4.254 4.285	.538	Low High	4.254 4.287	.532	Middle High	4.285 4.287	.943

There is no significant difference between children's assessments by economic status. That is to say, children and young people from the lowest, middle, and highest thirds of economic status report similar attitudes.

Comparison of children's attitudes by living with or without parents

Not surprisingly, children living with both parents expressed more support and help from their parents ($p = .01$). They tend to have more positive attitudes toward school ($p = .078$, not significant).

Table 6.26 Comparison of children's attitudes by living with or without parents

Children’s attitudes	without parents - with parents	N	Mean	Std. Deviation	P value
Attitudes toward school	living without mother or/and father	217	3.521	.3298	.078
	living with both parents	1083	3.564	.3394	
Relationships between students	living without mother or/and father	217	4.355	.6562	.853
	living with both parents	1083	4.364	.6214	
Treatment by teachers	living without mother or/and father	217	3.961	.6380	.737
	living with both parents	1083	3.977	.6075	
Position of parents	living without mother or/and father	217	4.184	.6188	.010**
	living with both parents	1083	4.302	.5351	
** P<0.01					

Correlation of Attitudes

Correlation analysis (Table 6.27) shows that the four scales of school attitudes are closely correlated. Children's assessment of attitudes that impact on school climate was consistent.

Table 6.27: Pearson Correlations (r) between attitudes

Children's attitudes	Attitudes toward school	Relationships between students	Treatment of teachers	Position of parents
Attitudes towards school	1	.363(**)	.455(**)	.298(**)
Relationships between students	.363(**)	1	.495(**)	.426(**)
Treatment by teachers	.455(**)	.495(**)	1	.443(**)
Position of parents	.298(**)	.426(**)	.443(**)	1

** Correlation is significant at the 0.01 level (2-tailed).

While the majority held universally positive views there was a minority of young people whose attitudes in all domains were negative. If violence reduction policies and strategies are to be successful, ways to reach and engage these disaffected young people will need to be found.

RECOMMENDATION:

- Ways of engaging the minority of young people with negative attitudes to school, their peers and teachers should be explored.

Place and Time of Bullying

Bullying occurred commonly in all places included in the questionnaire, specifically in the schoolyard, wooded areas near the school, hallways, and on the way to and from school, but was less present in areas such as the library, computer rooms, and dining rooms (Table 6.28). These locations are areas in which children are less likely to be supervised or to be engaged in constructive activities.

Table 6.28: Places of bullying - Frequencies

Places of bullying	Many times a Week		Every Week		Once or twice		Never		Not applicable	
	N	%	N	%	N	%	N	%	N	%
Schoolyard	147	11.3	90	6.9	341	26.2	587	45.2	135	10.4
Wooded area near school	101	7.8	69	5.3	182	14.0	716	55.1	232	17.8
Hallways	95	7.3	95	7.3	308	23.7	661	50.8	141	10.8
On the way to and from school	86	6.6	101	7.8	310	23.8	598	46.0	205	15.8
Gym	57	4.4	65	5.0	225	17.3	797	61.3	156	12.0
School bathroom	49	3.8	34	2.6	104	8.0	868	66.8	245	18.8
Classroom	38	2.9	61	4.7	253	19.5	792	60.9	156	12.0
Dining hall	14	1.1	40	3.1	57	4.4	1037	79.8	152	11.7
Computer rooms	5	.4	26	2.0	29	2.2	1049	80.7	191	14.7
Library	3	.2	14	1.1	15	1.2	1104	84.9	164	12.6

School related bullying is a common occurrence at all times of the day, especially after school and during breaks (Table 6.29).

Table 6.29: Time of bullying – Frequencies

Time of bullying	Many times a Week		Every Week		Once or twice		Never		Not applicable	
	N	%	N	%	N	%	N	%	N	%
After school	146	11.2	100	7.7	404	31.1	449	34.5	201	15.5
During break periods (lunch, recess)	122	9.4	92	7.1	376	28.9	570	43.8	140	10.8
Between classes	63	4.8	85	6.5	319	24.5	676	52.0	157	12.1
On the weekends	31	2.4	28	2.2	138	10.6	665	51.2	438	33.7
Before school	20	1.5	39	3.0	178	13.7	825	63.5	238	18.3
During classes	13	1.0	36	2.8	135	10.4	961	73.9	155	11.9

It is clear from these results that bullying is a significant problem for students in schools and when travelling to and from school. Although it will be important to target “Hot Spots” for extra supervision (such as the school playground, wooded areas surrounding schools, and after school gathering places) when tackling the problem, the most effective policies and strategies for reducing bullying are those which are an integral part of school policies and strategies to reduce violence overall. Separate anti-bullying campaigns rarely have any lasting effect.

Concluding Comment

This study of violence in schools was undertaken both to contribute to the overall picture of violence against and among children in Georgia, and more specifically, to inform the MoES Safe School Initiative. A stand alone report of violence in schools is being produced (Zolotor et al 2008) which will provide a more detailed discussion of the findings and recommendations in relation to the development and implementation of the Safe School Initiative. The recommendations found in Chapter Eight of this report, while they include some recommendations relating to violence reduction in schools, are mostly more general and some relate to violence occurring in more than one setting. A summary of the recommendations specifically relating to the Safe School Initiative can be found in Annex 6 of this report.

Chapter Seven: Children's Views

All the children interviewed were given the opportunity to express their ideas regarding the prevention of violence. This opportunity was given by ending the interview with an open ended question, formulated in the following way: "Do you have any suggestions for preventing violence against children?"

In all three groups of the study – families, institutions and schools – approximately one quarter of the children (about 700) shared their ideas with the interviewer. The responses were a mixture of observations and ideas about preventing violence.

Suggestions from the children who were interviewed about violence experienced in families and institutions were more general and included all environments, while those who were interviewed about violence experienced in school tended to refer more specifically to violence at school.

It was possible to group the children's responses into a number of themes. Below the views expressed by the children are summarised. Some direct quotes from children are included to further illustrate their viewpoints.

The Role and Influence of Adults in Reducing Violence

In their suggestions, children often talked about the importance of attention and respectful treatment from adults towards children as a way to reduce violence. They recognised that adults should provide control and offer guidance to children about their behaviour. They also mentioned that adults should organise activities to keep children busy, and highlighted that it is necessary to have an adult around to whom they can turn to for advice and help when needed.

The following quotes illustrate the above points in the children's own words:

- "Adults should pay more attention to children"
- "In case of troubles, children should have the possibility to refer to adults (for example headmasters, or other responsible people, who could help)"
- "Children's learning process should be conducted via non-violent methods - games"
- "Adults should explain the rules to the children in a friendly manner"
- "Children should be kept busy with fun activities"

Importance of the Family Environment and Attitudes to Childrearing

Children thought that both the family atmosphere and attitudes to child rearing were important. They mentioned that parents should act as role models for their children. In their opinion non-violent environments would both help prevent violence towards children and protect them from committing violence themselves.

- "Peaceful families where there is no conflict and environments free of disorder will lead to a reduction in violence against children"
- "Adults should treat children warmly and with empathy"
- "It is important that parents provide "correct" rearing for children and serve as good role models"
- "Violence towards children will result in them behaving violently"

Raising Awareness on Violence Issues

Children understood that children and adults might need training in order to raise knowledge on the issues of violence and child rearing:

- “Both children and adults need to learn not to be abusers”
- “Adults should be taught how to treat children”
- “Everybody should be familiar with Children’s Rights and should protect them”
- “Young people also require training in parenting skills”

The Importance of Law

Children often emphasized the importance of law. They said that the law should protect them from violence and punish abusers.

- “Children should know their rights and laws”
- “Law should protect children from violence”
- “Perpetrators should be punished”

Personal Safety

Children often mentioned Personal Safety rules; however in these cases they associate danger and violence with strangers only.

- “A child should not get in a stranger’s car”
- “A child should not speak with strangers”

Media Influence

Children think that the media plays an important role in fostering violence. They see television as a significant source through which violent behaviour in children can be encouraged.

- “Violence broadcasted through TV influences increases in violence”

Other Observations

It is also important to mention that over the course of the interview respondents frequently denounced beating and corporal punishment. Some of the respondents thought that strictness was essential; while others thought that punishment was necessary. Some of the responding children included “beating” and “banning a favorite activity” under forms of punishment. In some cases it was not clear whether the children considered physical punishment as a form of abuse. Some of them thought that if a child behaved well, there would be no violations from the adults’ side, meaning that they were already beginning to justify the use of violence.

Some children sought causes of the violence and expressed the view that the social situation results in parents expressing their frustrations as aggression towards their children, or meant they could not manage to look after them properly.

Additional Views Expressed by Children from Institutions

These children were clear about the importance of attention from adults and the need for their active involvement in violence prevention.

- “Adults should protect children from violence”
- “Adults should pay more attention to children so that violence does not happen”
- “Adults should teach children how to protect themselves from violence, especially the children who are soft-natured”

- “During difficulties child should be able to talk to an adult, a person who could help”.

On the positive side some of the children said that during past years measures have successfully been taken to prevent violence in institution and they now feel safe

Additional Views Expressed by Child about Violence in Schools

Suggestions of those children who were interviewed about violence in school often saw the solution being to strengthen discipline, control and security at school.

- “Security should be strengthened at school”
- “Discipline should be stricter”
- “Control should become stricter”
- “I have a great wish that cameras are installed in order to reduce offences”
- “Supervision on children should become stricter”
- “Everything needs control from headmaster – both teachers and students”
- “Bullies should be punished”

Children also emphasized the importance of raising the awareness of violence for children as well as for teachers, and the need for psychological support teams to be present at school.

- “It would be good if one-hour lesson is given on this [violence] and [it] should be started from early age”
- “Teachers should talk to us about violence during lessons”
- “Psychologists should come and conduct lesson on keeping calm for us”
- “Lessons on violence should be conducted and teachers should attend them as well”
- “Psychologists should work with children so that these bad habits do not exist”
- “Lectures on abuse and children relationships”
- “Trainings on behaviour should be conducted for those who are seen to have violent behaviour”

Conclusion

The children, in answering the questions asked of them, revealed issues that were real and painful for them. A number of them had clearly reflected on the causes and reasons for violence. They seemed aware that parents may be under stress and need education and support in child rearing. They were also clear about the attributes they would like to see in adults caring for them, whether at home, in residential institutions or in schools, and unequivocally consider adults have a responsibility to protect children from violence and to provide supervision.

They accepted that they themselves have a responsibility to behave well and that adults should provide guidance, and when necessary, discipline. For themselves, they wanted more education on the management of conflict and suggested the other adults, including teachers, would also benefit from such training. The children recognised the need to promote the rights of children and acknowledged the role that the law has to play in their protection and in the punishment of perpetrators. There were also indications that they would benefit from information and training on personal safety.

When developing the recommendations of the Study, the views of the children were, where ever possible, taken into account. However, the style of the research, with its structured questionnaires and quantitative approach, did not allow for too much flexibility in the way of true consultation with children. Some form of wider consultation with children on violence prevention would undoubtedly be valuable. It is clear that children understand the need for action, and as both the children of today and the parents and professionals of tomorrow, their full involvement in any violence reduction strategies is essential.

Chapter Eight:

Overview of Findings and Recommendations

The findings of this study need to be seen against the background of the universally high rates of violence against children revealed by both the WHO report (Krug et al 2002) and the UN Study (2006). This placement puts findings from Georgia, which may initially seem alarming, into perspective. The study also confirms that, as in most countries of the world, urgent action is needed within Georgia to combat violence against children.

This chapter is divided into two sections. The first presents and comments on an overview of the study findings, and the second brings together the recommendations from the study under the two main themes of violence reduction and responding to child abuse and neglect.

Overview of Findings

The study shows that children are experiencing violence in all the settings studied: home, school and residential institutions. In all three settings, the perpetrators may be either an adult or another child.

Discipline, Punishment and Violence in the Home

The study addressed violence against children in the home from two perspectives. For the children under 11 years, carers were asked for details of the methods used by them and other regular carers to teach children the right way to behave or to address a behaviour problem. Children over 11 were interviewed and asked for details of their own experiences. In addition, they were asked to indicate if the perpetrator was an adult or another child in the household.

The study found that while the majority of children living at home in Georgia have their mother as their primary carer, there may be a range of other adults, usually close relatives, who also play an important role in their care.

Carers Reports

The reports from carers (mainly parents) show that almost all (90.8%) are using some positive management methods. Answers given to an open ended question also show that many are aware of and subscribe to non violent approaches to child rearing. Despite this the findings on punishments show that parents in Georgia, in common with parents in other countries, use a range of physical and psychological punishments when disciplining their children. Overall in the year prior to the study, parents admitted to subjecting 79.8% of children under the age of 11 years to physical discipline and 82.3% to psychological punishments.

These punishments were often introduced at an early age. Nineteen percent of children aged one year or under were physically disciplined rising to 90% of 4 - 7 year olds. Psychological punishments follow a similar pattern. Thus both physical and psychological punishments, as methods for controlling bad behaviour, are well established for the majority of children by the time they

start school. Similar rates of physical and psychological punishments were reported for boys and girls.

It is interesting to note that there were no significant differences in the use of physical and psychological punishment or use of positive approaches between the parents in the general population and the IDP parents. The IDP sample had been included because of concerns that difficult living circumstances made the children more vulnerable to violence. For the subjects of this research, who were living in larger collective centres, there was no evidence that this was resulted in an increased use of violent punishment.

Rural parents, however, did report higher rates of both physical and psychological punishments, reinforcing the need to invest in nation wide activities to reduce violence against children.

The most common physical punishments reported by carers were smacking the child on the bottom with a hand (51.7%) shaking (46.1%), pulling hair, and twisting ears (43.8%). While some may consider these to be mild or moderate forms of discipline, they involve some level of violence being directed towards the child, and could therefore be considered as cruel and degrading; treatment that the Convention on the Rights of the Child seeks to abolish.

Parent's attempts to use positive approaches would indicate that a campaign to promote such methods might meet with some success. It would however need to target parents early in a child's life and be inclusive of others who may be caring for children, including grandparents. Parents would need ongoing encouragement to make such methods work and there are implications for the training of professionals who could give this encouragement, together with advice.

Other physical punishments reported by the parents were more severe with just over a fifth (21.5%) admitting to repeatedly beating (beating up) the child. There were also the occasional reports of attempted choking and suffocations (total of 8) and burning the child as punishment (8). Such actions, especially if repeated might legitimately be considered abusive. Children experiencing such severe punishments may well suffer from both physical and psychological harm, and it is likely the family is struggling to cope with child rearing. A few may be intentionally inflicting injury on their children. Without the capacity to assess suspected cases of abuse, such cases will go undetected.

The high rates of physical punishment highlight the extent of the challenge facing the Government of Georgia if they are to fulfil their commitment to prohibit all physical punishment in the home as well as in schools and residential institutions. This prohibition requires an attitudinal change, not just by the public, but also among professionals. An initial step towards this change could be a public debate together with initiatives to provide parents and other carers with the attitudes and skills needed to encourage good behaviour in children and control bad behaviour without resorting to violence.

The most common reported forms of psychological violence were yelling at the child (75.1%), calling the child derisory names (31.2%), cursing the child (29.8%), and threatening to abandon the child (27.4%). These are actions many parents the world over would admit to doing. The harm caused to the child will be dependant on how often and in what combination these actions occur as well as how well they are balanced with positive interactions with the parent. Certainly, the calling of names and cursing, if persistent, can damage self image and esteem and may also provide a negative model for the child to follow in his or her own interactions in the home and at school. Threatening to abandon a child can be particularly distressing to a young child who may believe it will really happen. Once again, both professionals advising parents and working with children as well as parents can benefit from information on the detrimental effects of psychological punishments.

The parents considered that 20.8% of the children had not had one or more of their basic needs met, such as health, nutrition and protection from accidents, in the last year. This failure may not

have been the result of any omission by the parents or other carer, although 5.2% reported the child had suffered a preventable serious accident. Not unexpected there were more reports of neglect in the lower economic group. Significantly more reports were also found among parents in the regions, and especially among rural parents. This finding deserves further consideration, but is outside the scope of this study.

Reports of sexual abuse were low with parents only identifying 0.3% of the children as suffering from such abuse. It can be debated whether or not this represents significant under reporting or lack of recognition by the parent. However even if “only” five children out of 1,650 were sexually abused in the last year, these children and families still need access to facilities with staff trained to provide appropriate intervention. Children and families and front line workers need to know how to access any such services that do exist.

Children’s Reports

Another perspective of violence against children in the home was obtained through the interviews with children over the age of eleven. This included an additional dimension: exposure to violence in or close to the home. High exposure to such violence might be expected to influence an older child’s attitudes towards the use of violence in interactions and as a way to solve conflicts.

With the children’s experiences it was possible to make some international comparisons using data from the ICAST pilot countries. This confirmed that the experiences reported by children in Georgia are within the ranges found elsewhere. Reports of exposure to violence in and around the home (26.6%) were relatively low compared to the pilot countries.

The most common reports for the last year were of adults yelling and shouting at each other in a frightening way (15.5%). Witnessing of physical violence between adults were low (2.3%) and much lower than in three of the four pilot countries. Thus the indications are that children in Georgia are not witnessing high rates of physical domestic violence between adults in the home. In this respect the majority parents are providing a positive role model to their children.

Fifty-four percent of the children reported experiencing physical violence directly involving them and 59.1% reported psychological violence. As with the reports given by parents, there was no statistically significant difference between children from the general population and IDPs for the last year. However when the IDP children looked back beyond the last year their reports of physical punishment compared to the other children did reach significance. This may well reflect difficulties in the past that are not so severe now. The majority of children in both groups were from middle income (for Georgia) families, suggesting that the IDP families had gained a certain amount of stability. The higher rates of physical and psychological violence reported by rural parents were not mirrored by the reports from rural children.

The pattern of violence described by the children shows a continuation of the type of violence reported by parents with a lot of hair pulling, ear twisting and slapping with the hand. Overall this violence was more likely to be the result of punishment by an adult but enough other children were also reported as being responsible for such acts to raise concerns about peer violence in the home. If peer violence is occurring within homes it is likely to influence the behaviour of children in school.

Boys reported significantly more psychological violence than girls, showing a gender difference that was not reported for the younger children. This may in part reflect the inclusion of peer violence in this component of the study. Physical victimisation was found to decrease with age.

The reports also provided evidence that a small number of children were experiencing severe disciplinary measures including repeated beating with an object (3), attempted choking (9), burning (5) or restraining (29). This is further evidence that there are examples of probable physical abuse

within families living in the community. As with the younger children only an assessment of the child, the family and the incident would confirm these as cases of abuse, and indicate any action required to protect the child and support the family.

The most common forms of psychological violence were screaming at the child, insulting the child or making him or her embarrassed. The perpetrator could be an adult or child. In addition, 17.9% of children reported bullying within the home by another child in the last year.

Almost a quarter of the children considered themselves to have been neglected (not had one or more basic physical or emotional need met) in the last year. While this finding may seem high, it should be noted that it is lower than 3 of the 4 ICAST pilot studies. There were no differences found between the general population and IDPs, however, more cases of neglect were reported from children living in the regions and rural areas. The parents too had reported more neglect in the regions and in rural areas

A total of 95 (9%) of children reported some form of sexual abuse happening in the home. While the majority of incidents involved another child or young person, adults were reported as having sexually abused 27 of the children. The IDP group reported significantly less sexual abuse ($p = .011$ for last year) while rural children reported significantly more. This finding highlights the importance of developing services that are accessible to the entire population.

Violence in Institutions

When considering the reports from children living in social care institutions it is important to acknowledge that they are likely to have experienced a number of adverse life events and may even have been abused and neglected before admission to the institution. For this study the children were asked to focus solely on events that had occurred in the institution.

Most of the children reported that they felt safe in the institution, but at the same time, 71.1% reported physical violence and 61.5% psychological violence in the last year. There were no statistical differences between boys and girls, and like children living at home, physical violence decreased with age. The rates for the 11-12 year olds are concerning with 85.6% reporting physical violence and 68.8% psychological violence.

In contrast to children reporting on experiences in the home, children in the institution most commonly identified another child as the instigator of the violence although twisting ears seemed to be largely perpetrated by adults. However, some adults were clearly using both physical and psychological punishments to discipline the children. Some of the techniques used could have caused physical injury to the child. Adults were also reported as using derogatory names and shouting at the child. 28.9% of the children reported having belongings stolen or broken with a few exceptions this was by another child. This is likely to be particularly upsetting for a child with few personal belongings.

The “neglect” experience most commonly reported by the children in institution was lack of support or feeling unimportant. Significantly more girls (38.6%) than boys (26.3%) described “neglect” in the last year. The youngest age group (boys and girls) were also suffering high rates (37.6%)

Sexual abuse was reported as having happened in the institution by 17.3% of the children and within the last year by 16.6%. There were no statistically significant differences between girls and boys, and the most commonly reported unwanted activity was being shown pornography. Of the 50 children reporting sexual abuse on one or more occasions in the last year, 72% said they had been abused by another child, 8.0% by an adult and 20% by both an adult and a child. The examples where an adult was identified as a perpetrator included activities such as the removal of clothes, touching and forced sex (1 example only) – actions which are completely unacceptable and unquestionably abusive.

Violence in Schools

The study of violence in schools used not only the same ICAST questionnaire (ICAST CI) as had been used with children in residential institutions, but also included some questions on school climate. These revealed that the majority of children in Georgia report positive attitudes towards school, relationships between students, treatment by teachers, and position of parents.

The children reported high rates of physical (47.1%) and psychological victimisation (47.5%). It should be noted that these percentages are well within the range reported in the ICAST pilot countries. Sexual victimization is less commonly reported. Boys more often report all types of victimization demonstrating a gender difference not so apparent within the home where only psychological violence was more commonly reported for boys over eleven. As for the home and institution, physical victimization within school decreases with increasing child age.

Both adults and children were reported as perpetrators of physical and psychological violence. In contrast, children perpetrate the majority of sexual violence. It should be noted that adults would have included more than teachers.

As for types of physical violence experienced within school, children most commonly reported slapping on the hand or arm (most often by a child), twisting the ear (most often by an adult), pulling hair (most often by an adult but also commonly by a child), being hurt (most often by a child) and being slapped on the head or face (most commonly by a child). Severe forms of physical violence are reported less commonly (crushing fingers, cutting, choking, burning) and more often by children than adults. The most common types of psychological victimization are shouting, swearing, threatening with bad marks, calling names, insulting, making you feel stupid, and stealing your belongings.

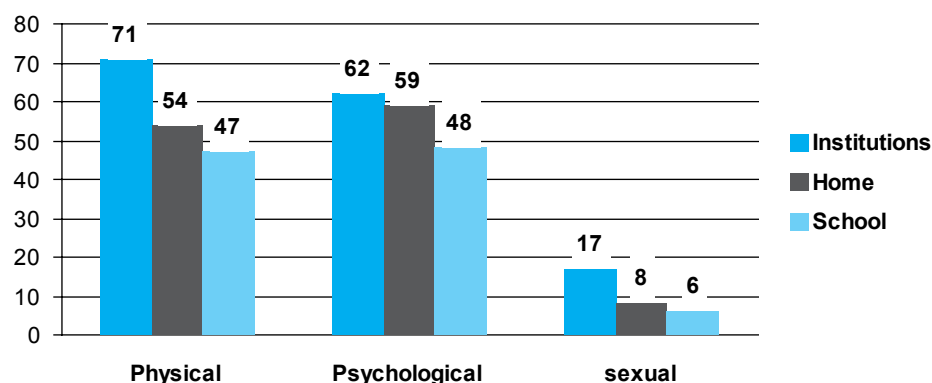
The vast majority of perpetrators for all types of sexual violence were children, with the showing of pornography (4.5% of total sample) and unwanted kissing (0.8%) being the most common unwanted behaviours.

Bullying was reported as occurring most often in the schoolyard and wooded area surrounding the school and most often after school, although a wide variety of other locations and times are broadly endorsed as context for bullying.

Comparisons of Violence in the Different Study Settings

The children have shared their experiences of violence in three settings – the home, residential institutions and schools. All the data were collected through face to face interviews. The questionnaire ICAST CI was used for the residential institutions and for the schools. The questionnaire for children's experiences in the home ICAST CH obtained information on the same categories of violence but there were some differences in the individual questions asked. Despite these differences, it would seem legitimate to compare the children's experiences in the three settings (Figure 1).

Figure 1: % of types of violence reported by children in three different settings



Significantly more children report experiences of physical ($p=0.0009$) and psychological ($p=0.0001$) violence in the home compared with school. The reports of sexual abuse are not significantly different between home and school.

Significantly more children in institutions report physical violence than do children at home. For psychological violence the difference was not significant.

If school and institution are compared, the reports for all types of violence are significantly higher for children in institutions ($p < 0.0001$).

Children in Georgia experience more physical violence and sexual abuse within institutions than they do either at home or in school. They also suffer more psychological violence within institutions than in school. Children experience more physical and psychological violence at home than they do in school. Thus while problems exist with violence within schools, they are less than either within homes or residential institutions.

When it comes to tackling violence in schools, account will need to be taken of the children's experience of violence in other settings, especially the home. It should also be recognised that for some children school is a relatively safe place and they may well disclose details of violence elsewhere to a trusted adult or peer within the school. Introducing a Safe Schools Policy will make such disclosure more likely and the staff need to be prepared to respond.

Recommendations

Throughout the text recommendations have been included immediately following the supportive data. In this section an overview of the recommendations is presented in two main sections:

- **Reduction and Prevention of Violence against Children and Promotion of Non Violent Values**
- **Identifying and Responding to Child Abuse and Neglect**

Recommendations in both sections have implications for national policy, professional training and capacity building, as well as programme and service development. Many of the recommendations are interlinked and taken together begin to form the basis of an integrated response to violence and abuse against children in Georgia.

The study has shown that in many respects violence against children in Georgia is similar in its nature and extent to violence against children elsewhere in Europe. However, while one may learn from initiatives elsewhere, it is important that responses within Georgia are developed locally and are compatible with local circumstances and cultures. A policy, strategy or service developed for one culture does not necessarily transfer easily to another.

Some overarching principles have emerged which should be considered when planning actions in response to the recommendations. Consideration should be given to:

- Building on existing strengths, such as parent's willingness to use non violent discipline methods and children's positive views of schools and parental support;
- Using the existing framework of services with universal coverage such as antenatal care, early childhood health services, education; all of which have excellent uptake in Georgia. Having considered how such services can be used or modified to address violence reduction and to respond to child abuse and neglect, the need for more specialised services will become apparent. From a funding perspective, building on existing services and structures usually gives better value for money than the introduction of separate and new services. It also leads to better cooperation between "Generalists" and "Specialists";
- Taking notice of children's views and seeking ways in which they can play an active role in implementing change;
- Looking at the recommendations in the context of the existing reform programme and how they will be met or could be met within reforms already underway. For example, the Safe Schools initiative is being directly informed by the Study and the setting of child care standards creates an opportunity for incorporating violence reduction policy and strategy in a number of settings, including residential institutions;
- Transferring learning from one setting to another within Georgia. Thus it is possible that a similar policy and strategy to that being developed for schools could be used in other settings, in particular residential institutions;
- Piloting an initiative in one or two locations with careful monitoring and evaluation before rolling out nationally. However all initiatives should, from the outset, be clear on how they could reach all regions of the country and be made accessible to those (families and professionals) living in rural areas;
- Planning for ongoing data collection. This is included in a number of the recommendations, including for the ongoing monitoring within schools of the Safe Schools initiative and for monitoring of the outcomes of a referral system for Child Abuse and Neglect.

Reduction and Prevention of Violence against Children and Promotion of Non-violent Values

- **Public Awareness**

There is a need to raise awareness about the extent and consequences of violence against children among the public and professional communities. Campaigns should avoid exaggeration and seek to promote non violent values rather than "shock" with extreme examples. Care must also be taken when discussing peer violence not to present children as delinquents and when discussing physical discipline in the home not to criminalise parents. An attitudinal shift is needed away from the acceptance of physical and punitive psychological punishment if violence against children is to be reduced. This shift applies to professionals and policy makers as well as to the general public.

- **Prohibition of Physical Punishment in All Settings**

The Government of Georgia is committed to this prohibition which is in line with recommendations taken from both the CRC and the UN Study on violence. Yet the study shows that physical

punishment is still being used by adults caring for children in the home, schools and residential institutions. It is to be hoped that the introduction of child care standards in institutions and the Safe Schools Policy will reduce any remaining use of physical punishments in these settings. The education of parents and other carers in the community as described above may also reduce physical punishment in the home; however, the effects will need careful monitoring. Any prohibition is likely to be taken more seriously if supported by legislation. It is unclear if the current laws within Georgia are sufficient to support a ban on physical punishment. A review of existing legislation is therefore required. If gaps in the provisions to protect children from physical punishment are identified, specific legislation should be considered.

- **Encouraging Use of Non-violent Discipline in the Home**

Families, including members of the extended family who care for the children, require early advice on using techniques other than physical and psychological punishments to rear and control their children. Ongoing encouragement and advice will be required if such techniques are to replace the physical and psychological punishments that are currently being used by the majority alongside positive approaches. Both family members and professionals need increased awareness of the potential harm physical and psychological punishments can cause.

Given the very high provision and uptake of antenatal care in Georgia (see MICS data) and the universal access to health services for young children, consideration should be given to channelling advice and support on encouraging good behaviour in children without the use of punitive discipline through these services. Staff will require training and support. Kindergarten staff will also have a role to play. The identification of such key staff and providing them with the knowledge and skills to provide advice and support to families is a priority. Those providing this training will also need to explore staff attitudes to discipline.

- **Prevention of Shaken Baby Syndrome**

This deserves a dedicated campaign to highlight the dangers of shaking babies. It should be acknowledged that parents are not shaking babies deliberately to cause harm and the great majority will want to avoid doing so once they recognise the danger. This is something paediatricians may wish to lead on as families are best targeted around the time of a baby's birth. The first step would be to ensure that paediatricians and other key staff members are themselves aware of the risks.

- **Reducing Violence in Institutions**

Codes of conduct should be developed within institutions that encourage non violent conflict resolution and the use of discipline that does not involve the use of physical or psychological punishment. A climate of respect should be encouraged between staff and children and between the children themselves. The introduction of codes of conduct and prohibition of violence will require staff training and support. Within institutions children should be actively involved in the development and implementation of codes of conduct. Some common sense initiatives (suggested by children), such as providing the children with supervised constructive out of school activities will reduce the opportunities for peer violence. Particular attention should be paid to protecting and meeting the needs of younger children within institutions.

The use of violence by staff within institutions should be prohibited by law and checks should be carried out when staff are hired to ensure that they do not have a known history of violence against children.

Consideration should be given to providing each child with a named person (mentor) to whom they can turn with concerns over their wellbeing including victimisation by other children or staff. The children themselves felt there should be someone to whom they could turn to with their troubles. Such individuals should ideally be recruited from outside the institution, so the child would also need a way of contacting them in confidence, possibly by telephone.

Many of the components of the Safe Schools Policy could be applied within institutions. The exception might be the involvement of parents. However, involving parents might be helpful if preparations are being made for a child to move back to their family. Help with using positive behaviour management should be included in the plans.

- **Reducing Violence in Schools**

Policy and action plans for the reduction of violence in schools should be developed in ways that encourage pro-social behaviour, and should not rely solely on sanctions to deter violence. They should focus on prevention through establishing and maintaining a school climate where violence will not be tolerated and will not flourish as well as timely identification and relevant responses to any acts of violence. Positive modelling of non-violent and pro-social behaviour by all staff in the school should be encouraged and supported by staff professional development training, which should be made available to all schools.

Bullying prevention programmes in schools are needed in all areas of the country and should be an integral part of the school action plan to reduce violence. Approaches to reduce bullying and to assist those who are bullied should be included in the school curriculum as part of teaching programmes for the development of personal and social skills.

The National Safe Schools Policy is being developed with the participation of all stakeholders. It should be supported by a National Strategy with cost effective funding and guidance for schools in how to create and maintain a safe and secure learning environment for all children and young people.

New legislation may be required to clarify the rights and responsibilities in schools to develop their own policies and action plans to reduce violence and to ensure the involvement of children and young people in the development and implementation of school policy. A National Forum for the Reduction of School Violence should be established to monitor and maintain the ongoing development of national policy and strategy and to champion the rights of children and young people to an education in school free from violence.

The study indicates the need for ongoing monitoring of violence in schools and the capacity of school organisation to be effective in reducing violence. For this to be possible schools will need a self review instrument that can be easily and regularly administered and which include not only measures for the levels and nature of violent behaviour, but also the levels and nature of pro-social behaviour. As importantly the violence in schools self review should include an assessment of the improvements in the school's organisation and the ability to address issues. This study will provide useful baseline data for ongoing monitoring against which the impact of future work can be measured by using the violence in school self review instrument.

Identifying and Responding to Child Abuse and Neglect

ALL children wherever they live should be protected from child abuse and neglect. This means that any system of referral and assessment must be designed to include all children including those living with their families and not yet identified as vulnerable. The response to suspected abuse and neglect needs to be consistent. The referral point should be accessible to children, families, the public and professionals. One possible way of providing such access would be through a telephone help line. Such a referral and assessment process runs more smoothly if there are agreed protocols between different sectors, agencies and services.

In the future consideration should be given to the introduction of mandatory reporting of suspected abuse and neglect by professionals working with children and families. This reporting would only become practical once a referral system has been designed and implemented.

Legislation may be needed to ensure children are fully protected, and that if necessary a child can as an emergency be removed from a high risk environment (including on occasions their own family) to a place of safety. Such action should be independent of criminal proceedings and should not rely on parental consent.

Within organisations, including residential institutions, schools and polyclinics, the process of identification and referral of suspected abuse can be facilitated by the development of procedures (“what to do if you suspect a child is being abused”) and the appointment of a named person to take responsibility for child abuse and neglect matters. Such a professional would receive additional training, be available to colleagues for advice, organise basic training within the organisation and link with the local referral and assessment system.

A referral system should be able to handle cases of suspected physical, psychological and sexual abuse and neglect, including cases where the perpetrator is another child. At the assessment stage, this means having the ability to call upon a range of professional specialists.

The following would be needed to support a referral and assessment process

- **Capacity Development and Training**

A great deal of expertise exists within the country, but at the present time no overall picture exists of who might be able to contribute to developing responses to CAN and to the training of others to do so. Some kind of skills audit would identify organisations and individuals who could be utilised in the development and delivery of a national training program. The NGO sector is likely to be heavily involved. Where the expertise does not exist within the country it may be necessary to look elsewhere.

A National Training Programme should be designed to provide:

- Basic training on the recognition and referral of suspected child abuse and neglect for everyone working with children;
- Profession specific training;
- Multidisciplinary (across sector) training for those accepting referrals and investigating and assessing cases of abuse and neglect;
- Specialist training for those providing therapy to abused children and their families.

- **Service Development**

If a child protection system is to be effective, identification of abuse and neglect must lead to appropriate help and support being available for the child and family. Services are needed to respond to all forms of abuse and neglect.

A review of existing services, including NGOs, is needed to ascertain those which could, with additional training and support, could provide such help.

Proposals could then be made for the development of specialist services, especially within the regions (to include mental health services, therapy for abused children and for child perpetrators of sexual abuse)

- **Data Collection and Monitoring**

An ongoing data collection system should be designed to collect information on the recognition (reporting) of child abuse and neglect within the country. Later this can be extended to look at responses and to monitor changes in incidence. Social welfare should take responsibility for the implementation and monitoring of the identification and initial assessment process within institutions.

Suggestions for Further Research

This study has identified the following areas as requiring possible further research. As indicated below some could be partially addressed by further interrogation of the collected data.

- **Sexual Abuse:** while this study has confirmed that sexual abuse is a significant problem in Georgia, it was felt that a different approach is needed to learn more about its true extent and nature.
- **Abuse of Babies and Toddlers:** a first step here could be further analysis of the study data. Given that abuse in this age group can be fatal or severe, examination of deaths and admissions to hospitals of seriously injured small children should be considered.
- **Abuse and Neglect of Disabled Children:** unfortunately the resources available to the study did not allow for the inclusion of disabled children.
- **Experiences the Younger Children (11-12 year olds) within Institutions:** this age group reported high levels of physical and psychological violence and feelings of neglect. Further analysis of the data may provide additional information, but a larger study is needed.

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Annexes

Annex 1:

National Study on School Violence in Georgia

Executive Summary

Introduction

The Ministry of Education and Science of Georgia (MOES) is seeking to develop a safe school policy with the goal of creating schools as places free from violence to enhance the education and development of children and young people in schools in Georgia. To best develop a safe school policy, the MOES recognizes the need to understand the scope of school violence, including peer violence and adult to child violence. The school violence study was part of a broader effort in Georgia to collect data on childhood violence to inform practice and policy around violence prevention and the development of a child protection system

In 2007 UNICEF, in collaboration with the Governmental and non-governmental sectors, commissioned the National Study on Violence against Children. The main aim of the study was to learn the extent and nature of violence experienced by children in Georgia. The publication of the United Nations Secretary-General's Study on Violence against Children in 2006 had drawn attention to the extent of violence against children world wide. The UN Study also encouraged countries to undertake further research and analysis on the magnitude and nature of violence against children and to use the findings to facilitate the development of country wide plans to prevent and respond to all forms of violence against children.

Aims of the Study

The overall aims of both phases study were to identify within school in Georgia:

- The extent of violence against children.
- The pattern of violence.
- Factors associated with violence
- The extent and type of response needed to prevent violence and child abuse and neglect

The school study results will be used for reporting back to the appropriate ministries both the nature and context of the violence, but also to assist in the development of some policy recommendations to inform the development of a safe schools policy by the work

Target Group.

- 1300 children aged 11 to 17 years from 93 schools.

The study used a two stage sample approach. 93 Schools were selected at random Over one third were from Tbilisi (33/93). Among each grade level, 1 class was chosen at random and in each class, 1 boy and 1 girl were chosen at random.

Research Instruments

The main research instrument was the ISPCAN Child Abuse Screening Tools – (ICAST), Children's Institutional (CI) version. These are internationally validated research tools developed in response to the UN Study's call for a set of common instruments to be used to assess child victimization in a multi-national/cultural/linguistic context.

These instruments use structured interviews which focus on acts experienced by children that were agreed by the scientists to be common or serious. While the tools do not include a definition of abuse, many if not all of the actions included can be described as distressing or degrading for a child. THE ICAST CI survey and manual were translated into Georgian and independently back-translated into English to ensure accurate interpretation.

In order to better inform the MoES Safe School Initiative, two additional pages of questions on school climate, attitudes, location, and timing of bullying and violence were added. This was intended not only to assess such practical aspects of school violence such as common times and locations of bullying but also to give a more general sense of children's attitudes to school. The questions used were based on the World Health Organisations Behaviour Survey for School - aged Children; another internationally validated instrument.

Basic demographic data such as age, gender and location , and survey of assets was collected for all the target groups.

Findings

Experiences of Children in school (total 1300)

Students' attitudes to school, including relationships between students, treatment by teachers, and position of parents were very positive and most children and young people reported feeling safe at school.

The reported levels of physical and psychological violence were very similar (47.1% and 47.5%). Sexual violence was much less commonly reported (7.3%)

Gender differences were marked in the study, with girls experience less of all types of violence than boys. Thus 36.6% of girls and 57.7% of boys reported physical and 44.3% of girls and 50.7% of boys reported psychological violence. As in other setting, physical violence decreased with age but not psychological violence or sexual violence.

The most common perpetrator of all types of violence was other students. However adults in the school were often cited for physical and psychological violence. The most common behaviours reported were slapping (most often by a child) and twisting the ear (by an adult). More serious violence was less common and more likely to be perpetrated by another child than an adult. It included crushing fingers, cutting, choking and burning. Psychological violence as in other settings commonly involved shouting and swearing at the child often by an adult.

The vast majority of perpetrators for all types of sexual violence were other children, with the showing of pornography and unwanted kissing being the most common victimizing behaviours. Very few adults were implicated in sexually inappropriate behaviour which must be seen as another positive finding in relation to violence within schools in Georgia.

Violence between students was most likely to occur in school play areas and on the way to and from school.

Conclusion and Recommendations

Children in Georgia have been shown to be experiencing high levels of violence in all the settings studied. Within schools, while peer violence is justifiably seen as the major issue, attention should also be paid to the use of physical and psychological violence perpetrated by adults working in the institutions and schools.

While focusing on a range of violent behaviours the study has demonstrated that in all the settings studied there are examples of severe and serious actions that would warrant referral for assessment of possible child abuse.

In responding to the study findings it will be important to build on identified school strengths. Reduction of violence will require an attitudinal shift in society away from an acceptance of violence against children. More specifically education of the public, families, children and professionals is needed. Legislation may be required to ensure the Government of Georgia's commitment to prohibition of physical punishment becomes a reality. Schools need to develop policies and strategies to reduce violence and make such settings safe for children. The Safe Schools Initiative of the MoES is an example of such a development.

Responding to child abuse and neglect requires a coordinated approach, agreed across sectors, which includes a clear process of referral and assessment of suspected cases. The process must be accessible to all; children and families as well as professionals and the public. The development of a referral and assessment system must be supported by training and service development.

Annex 2:

Project Management and Implementation – Roles and Responsibilities

	Name(s)	Responsibilities
Project Director	<i>Lia Saralidze</i>	<ul style="list-style-type: none"> • Co-ordination of project • Reporting to UNICEF • Keeping Stakeholders informed • Chairing: <ul style="list-style-type: none"> • Project team • Reference Group
Project Team (Working Group)	<p>PHMDFG project staff:</p> <p><i>Ketevan Tavartkiladze</i> – Psychologist</p> <p><i>Nino Gogvadze</i> – Psychologist</p> <p><i>Ira Sharabidze</i> – Social Worker.</p> <p><i>Ketevan Davitishvili</i> – Paediatrician</p> <p><i>Ketevan Batsankalashvili</i> - translation & communications</p> <p>Directors BCG</p> <p><i>Mamuka Nadareishvili</i> - Statistician (undertaking the sampling on behalf of project team)</p>	<ul style="list-style-type: none"> • Design of Research project plan • Production of research tools and associated documentation • Training of Interviewers • Implementation of research plan • Reporting research results • Delivery of agreed outputs (see proposed follow on products) <p>For those individuals responsible for each component of above, see project plan chart</p> <p>Will meet as required during all phases of the research</p>
Consultants to the project	<p><i>Margaret Lynch</i> (UNICEF Consultant)</p> <p><i>Desmond Runyan</i>, Dr PH</p> <p><i>Adam Jason Zolotor</i>, MD, MPH</p>	<p>Act as a resource to the project and are available for advice to project team</p>
Reference Group	<p>Representation from Ministries & selected NGOs</p> <p>UNICEF</p>	<ul style="list-style-type: none"> • To represent major stakeholders • To be available for advice to Director & project team at all phases of research • To meet twice during project: <ol style="list-style-type: none"> 1. During preparatory phase to act as professional focus group during finalisation of research materials 2. To discuss results & format of final report.

Annex 3: Description of the Sample

Main Parameters of the Sample Design

Sample Size – 3000 completed interviews.

Target population – Children from 0-17 (up to 18th birthday) throughout Georgia, except children in detention.

According to the set objective, the Sample Size is divided into three groups:

G1. Children from 0-17 living in the IDP Collective centres;

G2. Children from 11-17 living in child care institutions and public boarding schools;

G3. Other Children from 0-17.

Research Method: Individual interviews with children aged 11 and over in schools and other child care institutions. Information about children from 0-10 (up to 11th birthday) to be provided from their parents or guardian by means of an individual interview.

Sampling Unit: - a) Pupils from 11-17 in schools and child care institutions, except children living in IDP Collective centres¹; b) Family that does not live in IDP collective centres and has at least one child from 0-11; c) Family that lives in IDP collective centres and has at least one child from 0-17.

Sampling Frame – three different bases were used in the process of Sampling.

- a) Database of the census of the population of Georgia in 2002;
- b) Database of schools, public boarding schools and childcare institutions under supervision of the Ministry of Education and Science;
- c) Database of the Ministry of Refugees and Placement.

Sample Design: Random, multistage cluster sample.

Distribution of the Sample Size within the Groups

At the first stage of the sample formulation, the whole size (n=3000) was distributed within the groups G1-G3.

For the distribution of the size within the groups we derived from the idea that G3 group was the most important as it covers the main part of the target population. For the groups G1 and G2 we took the minimum size of the sample which would give us possibility to get valid assessments (not more than 5% error for 50% parameter with 95% reliability) in two main age groups (0-10 and 11-17). For more detailed aspects (for example, gender and age groups), error within these groups might increase up to 6-8 %.

Distribution in this way gives the possibility to get reliable assessments in 2-3 aspects for the whole General Population (example: rural/urban, gender, age group).

To define the minimum quantity of the Sampling Size n_i ($i = 1, 2$) for groups G1 and G2 we used the following formula:

$$(1) \quad n_i = \frac{p(1-p) \times N_i \times Z_{(1-\alpha)/2}^2}{p(1-p) \times Z_{(1-\alpha)/2}^2 + N_i \times \epsilon^2} \times deff$$

¹ Children from 11-17 who do not study in schools or other childcare institutions (for example street children) are not involved in the study.

Where:

p - is the value of the main parameter to be assessed. In our case, we took P equal to 0.5 as this will give the maximum value of the sample.

N_i - is the size of the General Population

α - maximum error (in our case 5%)

ε – level of reliability (in our case 95%)

$Z_{(1-\alpha)/2}^2$ - Quintile of Standard normal distribution level $(1-\alpha)/2$ (in our case it equals to 1.96)

$deff$ - value of Design efficiency to assess the parameter.

We did not have the information about Design Efficiency from previous studies of the same kind. As we are interviewing mainly differently aged children in a cluster, we decided that the $deff$ value would not be more than 1.2².

Formula (1) showed that we had to conduct about 900 interviews in Group G1, and about 300 interviews in G2; this gives us $n_3 = n - n_1 - n_2 = 1800$ interviews for G3.

Formulation of the Sample

Despite the fact that the number of boys in the General population is slightly higher than the number of girls, in order to make interviewers' work easier, it was decided that in the initial cluster of G1 and G3 two interviews should be conducted for each age group (one for a boy and one for a girl). It means that in every selected cluster 36 interviews will be conducted.

For each age group in G2, also, one girl and one boy should be interviewed.

Formulation of the Sample in G1 (Children living in internally displaced families):

Data of the collective centres, where at least 150 IDP people live, became the base of the sample.

Selection of the centres was conducted by PPS (Probability Proportionally to Size) method. 25 collective centres were selected in total and 36 interviews will be conducted in each of them. Families with a child will be selected by so-called "random wandering" method.

Formulation of the Sample in G2 (Institutions):

Only children from 11-17 will be surveyed in institutions.

Children from 11-17 are placed in 22 institutions of Georgia and their total number is 882.

The number of children within institutions varies from 22-110.

The study has to be conducted in every child-care institution and public boarding school.

Institutions according to their size were divided into three parts conditionally:

Small - with up to 28 children

Medium - with number of children 28-56

Big – with more than 56 children

In each institution, the interviewer has to make a list of number of girls and boys in each of the study age group.

7 interviews will be conducted in each small institution, 14 in medium, and 28 in big institution.

² If the value of Design Effect is higher, the assessment error will increase. For example, if $deff=1.7$ maximum possible error will be 6%.

In each medium institution, one randomly selected representative of each gender-age group has to be surveyed; and in big institutions – 2 representatives. In small institutions, one representative of a specific (defined in advance) gender from each age group, has to be interviewed.

Formulation of the Sample in G3 (Institutions):

Georgia was divided into 4 strata:

- S1. Tbilisi;
- S2. Large Cities;
- S3. Small towns;
- S4. Villages.

The whole Sampling Size was distributed through the Strata proportionally to the number of children in each of them.

The initial Sampling unit in Urban strata is a Census Sector, while in rural settlements the unit is “Sakrebulo” (Local Council).

The number of clusters to be selected was defined by dividing the Sample Size into 36.

For the selection of families in Strata S1-S4, clusters were selected by PPS method.

For each cluster within Strata S1-S3, a starting point and direction of movement has to be defined for the interviewer. Selection of families for interviewing will be conducted by “random wandering” method.

In each selected unit of S1-S3, schools have to be selected from the list of schools of the unit by PPS method.

In each selected “Sakrebulo” of the strata S4, a village will be selected by PPS method. In that village, interviews will be conducted in families as well as in schools.

Formulation of the Sample-School Study

Target groups - Children from 11 to below the age of 18 years;

Sampling Frame - Database of schools under supervision of the Ministry of Education and Science;

Sample Design: Random, multistage cluster sample;

Sample size – 1,302 complete interviews.

In the database provided by the Ministry of Education and Science, the addresses of 2,462 schools in Georgia were given. Information about the number of students in each class was also provided, however there were no lists of students.

Based on the fact that children between ages 11-17 generally study in the classes (school years) V-XI, the sampling base included the number of children currently studying in these classes.

Stratification of the schools was performed at the initial stage of the sample formulation. Two parameters were used for the stratification: 1. region; 2. the size of the settlement area.

Georgia was divided into 10 regions. Divisions mostly coincided with the administrative divisions of the country. Only Racha-Lechkhumi was attached to Imereti region and was considered as one unit.

Settlement areas were divided into three types according to the number of population:

- Big cities – more than 45,000 of population;
- Small towns – other regional centres;
- Villages.

In total 24 strata were formulated.

Sampling size was distributed among the strata proportionally to the number of students in each.

It was decided that in each class (age group) of the selected school, one girl and one boy should be interviewed i.e. 14 children in each school.

The number of schools in each stratum was defined by means of dividing the number of interviews to be conducted in this stratum by 14. In total, 93 schools were selected throughout Georgia.

Schools in the strata were selected by PPS (Probability Proportional to size) method.

Students in schools were selected with random principle. Specifically, for each class in each selected school the interviewer was given two random figures (one to select a boy and another - a girl) indicating the number of a student in the school journal according to which the interviewer should select a respondent. Interviewers were given instructions on how to replace a respondent in case the selected student was not of the relevant sex and age, or refused to participate.

Annex 4:

Definition of Economic Status

After analysing the completed general population and IDP questionnaires, three social groups were established.

Before starting the interviewing process, several questions were added to the questionnaires in order to find out respondents' economic status. By means of these questions we were able to gain the information about possession of some items in the surveyed families. The questions also referred to birthdays and the summer holidays of the respondents. Particularly:

- Whether their birthdays were celebrated in the **past** year or not; where was the birthday of the respondent celebrated by his/her family members;
- How they spent their holidays in the **past** year, where they went and what conditions they had.

Analysis of the answers to those questions showed that the majority of the families possessing six or more items celebrated their children's birthdays in celebration centers for children or restaurants. Besides, the majority of these families spend their holidays in holiday houses, hotels, or rented apartments.

Respondents who possess 3-5 items were classified as middle economic group.

Respondents possessing less than 2 items were classified as low social economic group. The majority does not celebrate children's birthdays at all, or celebrates at home. Moreover, they spend holidays at home, only the minority go to villages to stay with their relatives.

Annex 5:

Objectives Training for Supervisors of Interviewers (CAN)

1. To gain understanding of what is meant by “child abuse and neglect.”
2. To understand in a non judgmental manner why it can happen.
3. To understand what may be the consequences of CAN.
4. To know what to do if a parent or child becomes distressed.
5. To know what to do if current abuse is disclosed by a parent or child (including issues of confidentiality and child safety).
6. To be able to share all the above with interviewers.
7. To appreciate that discussion of CAN could upset some interviewers because of their own experiences.
8. To be able to debrief interviewers on completion of the field work and to acknowledge the importance of doing so.

Objectives for Training of Interviewers by Supervisors

1. To gain understanding of what is meant by “child abuse and neglect.”
2. To understand in a non judgmental manner why it can happen.
3. To understand what may be the consequences of CAN.
4. To know what to do if a parent or child becomes distressed.
5. To know what to do if current abuse is disclosed by parent or child (including issues of confidentiality and child safety).
6. To understand the benefits of seeking support from their supervisor and attending the debriefing session at the end of the field work.

Session for supervisors will be 2 hours and involve discussion (to get their perceptions of CAN). Power point presentation with discussion to cover objectives 1-3) objectives 4, 5 and 7 will be interactive with role play. A format for debriefing (objective 8) will be shared with the supervisors.

Annex 6:

National Study on Violence against Children in Georgia

I. Announcement in Schools and Institutions

Dear Friends,

United Nations International Children's Fund (UNICEF) is conducting a study on health and life experiences of children and parents in Georgia. The study is supported by International Society for Prevention of Child Abuse and Neglect (ISPCAN).

The study is executed by Public Health and Medicine Development Fund of Georgia together with partner organization BCG Research.

This is a national study, which, we believe to be very important for improving the situation of children and parents in Georgia. This kind of research is being conducted in many parts of the world to ensure the safety of children.

We would very much like to have an interview with you that will take about 20-30 minutes. The interview is private and the answers to the questions are recorded anonymously. Your name will not be shared with anybody. You may skip the questions you do not want to answer or stop the interview at any time.

We encourage you to participate in the study, as your participation is very important and valuable.

Thank you for cooperation.

On behalf of the Study group,

Lia Saralidze

Executive Director

The Public Health and Medicine Development Fund of Georgia

II. Consent from participants (adult and child)

Dear Friend,

My name is ----(Interviewer)----, I am working for BCG Research.

United Nations International Children's Fund (UNICEF) is conducting a study on health and life experience of children and parents in Georgia. The study is supported by International Society for Prevention of Child Abuse and Neglect (ISPCAN).

The study is executed by Public Health and Medicine Development Fund of Georgia together with partner organization BCG Research.

This is a national study, which, to our belief, is very important for improving the situation of children and parents in Georgia. This kind of research is being conducted in many parts of the world to ensure the safety of children.

We would very much like to have an interview with you that will take about 20-30 minutes. The interview is private and the answers to the questions are recorded anonymously. Your name will not be shared with anybody. You may skip the questions you do not want to answer or stop the interview at any time.

We encourage you to participate in the study, as your participation is very important and valuable.

Thank your for cooperation.

Consent from respondent:

I am willing to participate:

☐ Yes

☐ No

III. Consent from directors of schools and institutions selected as target locations

To Mr/Mrs
The Director of Public School #/Institution

Dear Sir or Madam,

United Nations International Children's Fund (UNICEF) is conducting a study on health and life experience of children and parents in Georgia. The study is supported by International Society for Prevention of Child Abuse and Neglect (ISPCAN).

The study is executed by Public Health and Medicine Development Fund of Georgia together with partner organization BCG Research.

The goals of the study are to identify within Georgia:

- The extent of Child Abuse and Neglect;
- The Pattern of Child Abuse and Neglect;
- Factors associated with Child Abuse and Neglect;
- The Extent and type of response needed to prevent Child Abuse and Neglect.

The Target Groups of the study are:

Children between ages 11-18, among them children living in institutions and IDP Collective centers – violent behavior against them in schools, families, and institutions will be studied.
Parents of Children between ages 0-11, among them parents of children living in IDP Collective centers – their own and other family members' behavior towards a child will be studied, as well as violent behavior against a child in school.

The study design is based on the design and questionnaires developed by the International Society for Prevention of Child Abuse and Neglect (ISPCAN) that are tested in several countries. The questionnaires have been translated; adapted and piloted. Duration of an interview is 20-30 minutes. Interviewing is based on respondent's free will and is anonymous.

3000 respondents will be interviewed. The interviewing process will take place in families, schools and institutions. The study is supported by the Ministry of Science and Education; Ministry of Labor, Health and Social Affairs; and Ministry of Refugees and Placement.

As a result of statistical selection, your school is among the institutions, where the study should be conducted.

We need your support and help in the following areas:

- Inform parents, children, school administration and teachers about the study;
- Provide an isolated room for interviews;
- Provide contact persons, who will help organizing the study process;
- Provide the lists of students between ages 11-18.

We kindly ask you to support us. It is our belief that the study results will help define the State policy that will ensure protection of children from Abuse and Neglect in Georgia.

Thank you for your consideration,
Lia Saralidze

Annex 7:

Specific Recommendations to support the development of a National Policy and Strategy to reduce violence in schools

(Taken from the full version of the violence in schools study report)

1. Given the levels of violence in schools in Georgia it is important that the MOES adopt a comprehensive policy and strategy to address concerns. This cannot be solely dependent on punitive responses when violence has occurred. Such responses must be balanced with proactive and preventive responses such as teaching students appropriate social and emotional skills which help students learn how to behave non-violently even when angry or provoked.
2. The report indicates the link between violence and the student's experience in schools. In this context schools clearly have a responsibility and should be supported to establish and maintain a school environment which is safe and secure for everyone. School climate and organisation have been shown to have a significant and positive impact on reducing violence in the school setting and also on improving learning.
3. The study data on violent behaviour should be used to identify the positive behaviours that should be developed to replace the negative violent behaviours recorded in the report. Developing more positive behaviour should involve the setting of targets at a national and regional level to answer the question "This is what we have – what do we want instead?"
4. The study identifies the need for an ongoing monitoring and review process at school, local and national level. The proposed school self-review in the national policy and strategy will build on, and continue to develop, appropriate data sources to measure the impact and effectiveness of strategies.
5. Some examples for possible inclusion in school action plans are included in the commentary on the study data and others are clearly indicated if supported by individual school self review data – e.g. changing boys attitudes to the 'glamour' of violence and gang membership; demonstrating that psychological violence is as important an issue to address as physical violence.
6. The report indicates that violence in all its forms is a widespread problem in both Tbilisi and the regions. It also indicates that adult violence towards children and young people is a common experience for students. To redress this all school staff should receive support and training in how to manage conflict and avoid violent behaviour including how they can achieve this by always offering positive role models to children.
7. School principals will need support in establishing and maintaining whole school approaches and providing comprehensive and on-going professional development for all school staff. The survey shows that many students experience a wide range of violence in school, for which it is unlikely that there will be one solution. School senior staff should be trained in effective whole school approaches that will create the climate in which violent behaviour is not tolerated and will not flourish.
8. The variety of experience of violence from school to school and the wide range of violence experienced by students is a further indication for the need for improved communication and the sharing of good practice between professionals in school
9. The results indicate that teachers make a difference and that generally students in Georgia have a positive attitude towards their teachers. This result gives a very positive basis to build on in looking for solutions-focused approaches at school level that are based on tolerance and respect between adults and children in schools.

10. Given that the report indicates that violence is perpetrated by and inflicted upon relatively young children in schools in Georgia, strategies for identifying children at risk and intervening early are an essential part of a national approach.
11. The report (as do other studies) indicates high levels of student to student violence. The response to this situation should be to strengthen student support systems in schools. This includes extending peer led initiatives so that those students with the ability to influence others positively have the opportunity to develop and apply their personal and social skills to the benefit of the school climate for non-violence.
12. Study findings indicate that violence occurs in the home, in the community, before and after school. Creating and applying active partnerships based on common beliefs and values with parents, other adults and organisations in the community will be an essential element of all policies and strategies.
13. Only through the continued collection and use of appropriate data will the MoES be in a position to determine whether the national policy and strategy is meeting targets and maintaining an on-going improvement. This study should contribute to the development of a regular school self review of the levels of violent behaviour, the pro-social behaviour that contributes to violence reduction and the capacity of the school organisation to continue ongoing improvements.

Annex 8:

PARENT QUESTIONNAIRE

PUNISHMENT, DISCIPLINE AND VIOLENCE IN THE HOME

Section A - Now I want to ask you about *<name of index child>*.

Q1. Child's Gender?

- ☐ Male
- ☐ Female

Q2. Child's Date of Birth ____/____/____ (day/month/year)

(If the parents do not know date of birth of their child, calculate it according to the age given in the next question)

Q3. Child's Age? _____ (completed years)

Q4. What position was (index child) born into his/her family?

(If position has changed because of sibling death, record current position.)

- ☐ Only Child
- ☐ First (Oldest)
- ☐ Middle
- ☐ Last
- ☐ Not biological child

Q5. What is the respondent's relationship to this child?

Female...

- ☐ Mother
- ☐ Step Mother
- ☐ Foster Mother
- ☐ Sister
- ☐ Grandmother
- ☐ Other relatives (e.g. aunt, cousin)
- ☐ Other (please write _____)

Male...

- ☐ Father
- ☐ Step Father
- ☐ Foster Father
- ☐ Brother
- ☐ Grandfather
- ☐ Other relatives (e.g. uncle, cousin)
- ☐ Other (please write _____)

Q6. Regarding (index child) is there another parent or adult carer in regular contact?

- ☐ No (Go to question 8) ☐ Yes

Q7. What is the respondent's relationship to this child?

Female...

- ☐ Mother
☐ Step Mother
☐ Foster Mother
☐ Sister
☐ Grandmother
☐ Other relatives (e.g. aunt, cousin)
☐ Other (please write _____)

Male...

- ☐ Father
☐ Step Father
☐ Foster Father
☐ Brother
☐ Grandfather
☐ Other relatives (e.g. uncle, cousin)
☐ Other (please write _____)

Section B - These questions refer to <name of index child>.

All adults use certain methods to teach children the right behavior or to address a behavior problem. I will read various methods that might be used and I want you to tell me how often you (*or if applicable, your husband/partner*) have used this with (*index child's name*) in the last year. Tell me if you [or your husband/partner] have done this to (*index child's name*): never; once or twice; three to five times; six to ten times; or more than 10 times in the last year. If you have not done this in the past year but have done this previously, please indicate this.

Q8. Explained why something was wrong

	<i>Once or twice</i>	<i>3-5 times</i>	<i>6-10 times</i>	<i>> 10 times</i>	<i>Not in past year</i>	<i>Never</i>	<i>N/A</i>
Responding parent/ adult carer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other parent/adult carer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q9. Told him/her to start or stop doing something

	<i>Once or twice</i>	<i>3-5 times</i>	<i>6-10 times</i>	<i>> 10 times</i>	<i>Not in past year</i>	<i>Never</i>	<i>N/A</i>
Responding parent/ adult carer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other parent/adult carer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q10. Shook him/her

	<i>Once or twice</i>	<i>3-5 times</i>	<i>6-10 times</i>	<i>> 10 times</i>	<i>Not in past year</i>	<i>Never</i>	<i>N/A</i>
Responding parent/adult carer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other parent/adult carer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q11. Hit him or her on the buttocks with an object such as a stick, broom, cane, or belt

	<i>Once or twice</i>	<i>3-5 times</i>	<i>6-10 times</i>	<i>> 10 times</i>	<i>Not in past year</i>	<i>Never</i>	<i>N/A</i>
Responding parent/adult carer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other parent/adult carer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q12. Hit elsewhere (not buttocks) with an object such as a stick, broom, cane, or belt

	<i>Once or twice</i>	<i>3-5 times</i>	<i>6-10 times</i>	<i>> 10 times</i>	<i>Not in past year</i>	<i>Never</i>	<i>N/A</i>
Responding parent/adult carer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other parent/adult carer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q13. Gave him/her something else to do (distracted him or her)

	<i>Once or twice</i>	<i>3-5 times</i>	<i>6-10 times</i>	<i>> 10 times</i>	<i>Not in past year</i>	<i>Never</i>	<i>N/A</i>
Responding parent/adult carer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other parent/adult carer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q14. Twisted his/her ear

	<i>Once or twice</i>	<i>3-5 times</i>	<i>6-10 times</i>	<i>> 10 times</i>	<i>Not in past year</i>	<i>Never</i>	<i>N/A</i>
Responding parent/ adult carer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other parent/adult carer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q15. Hit him/her on head with knuckle or back of the hand

	<i>Once or twice</i>	<i>3-5 times</i>	<i>6-10 times</i>	<i>> 10 times</i>	<i>Not in past year</i>	<i>Never</i>	<i>N/A</i>
Responding parent/ adult carer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other parent/adult carer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q16. Pulled his/her hair

	<i>Once or twice</i>	<i>3-5 times</i>	<i>6-10 times</i>	<i>> 10 times</i>	<i>Not in past year</i>	<i>Never</i>	<i>N/A</i>
Responding parent/ adult carer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other parent/adult carer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q17. Threatened to leave or abandon him/her

	<i>Once or twice</i>	<i>3-5 times</i>	<i>6-10 times</i>	<i>> 10 times</i>	<i>Not in past year</i>	<i>Never</i>	<i>N/A</i>
Responding parent/ adult carer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other parent/adult carer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q18. Shouted, yelled, or screamed at him/her

	<i>Once or twice</i>	<i>3-5 times</i>	<i>6-10 times</i>	<i>> 10 times</i>	<i>Not in past year</i>	<i>Never</i>	<i>N/A</i>
Responding parent/adult carer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other parent/adult carer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q19. Threatened to invoke ghosts or evil spirits, or harmful people

	<i>Once or twice</i>	<i>3-5 times</i>	<i>6-10 times</i>	<i>> 10 times</i>	<i>Not in past year</i>	<i>Never</i>	<i>N/A</i>
Responding parent/adult carer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other parent/adult carer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q20. Kicked him/her with a foot

	<i>Once or twice</i>	<i>3-5 times</i>	<i>6-10 times</i>	<i>> 10 times</i>	<i>Not in past year</i>	<i>Never</i>	<i>N/A</i>
Responding parent/adult carer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other parent/adult carer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q21. Put hot pepper or spicy food in mouth (to cause pain)

	<i>Once or twice</i>	<i>3-5 times</i>	<i>6-10 times</i>	<i>> 10 times</i>	<i>Not in past year</i>	<i>Never</i>	<i>N/A</i>
Responding parent/adult carer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other parent/adult carer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q22. Forced him/her to kneel or stand in a manner that results in pain

	<i>Once or twice</i>	<i>3-5 times</i>	<i>6-10 times</i>	<i>> 10 times</i>	<i>Not in past year</i>	<i>Never</i>	<i>N/A</i>
Responding parent/ adult carer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other parent/adult carer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q23. Cursed him/her

	<i>Once or twice</i>	<i>3-5 times</i>	<i>6-10 times</i>	<i>> 10 times</i>	<i>Not in past year</i>	<i>Never</i>	<i>N/A</i>
Responding parent/ adult carer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other parent/adult carer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q24. Spanked him/her on the bottom with bare hand

	<i>Once or twice</i>	<i>3-5 times</i>	<i>6-10 times</i>	<i>> 10 times</i>	<i>Not in past year</i>	<i>Never</i>	<i>N/A</i>
Responding parent/ adult carer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other parent/adult carer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q25. Choked him/her or squeezed his or her neck with hands (or something else)

	<i>Once or twice</i>	<i>3-5 times</i>	<i>6-10 times</i>	<i>> 10 times</i>	<i>Not in past year</i>	<i>Never</i>	<i>N/A</i>
Responding parent/ adult carer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other parent/adult carer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q26. Threatened to kick out of house or send away for a long time

	<i>Once or twice</i>	<i>3-5 times</i>	<i>6-10 times</i>	<i>> 10 times</i>	<i>Not in past year</i>	<i>Never</i>	<i>N/A</i>
Responding parent/ adult carer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other parent/adult carer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q27. Locked out of house

	<i>Once or twice</i>	<i>3-5 times</i>	<i>6-10 times</i>	<i>> 10 times</i>	<i>Not in past year</i>	<i>Never</i>	<i>N/A</i>
Responding parent/ adult carer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other parent/adult carer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q28. Took away privileges or money, forbade something [name] liked or prohibited him or her from leaving the home

	<i>Once or twice</i>	<i>3-5 times</i>	<i>6-10 times</i>	<i>> 10 times</i>	<i>Not in past year</i>	<i>Never</i>	<i>N/A</i>
Responding parent/ adult carer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other parent/adult carer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q29. Insulted him/her by calling [name] dumb, lazy, or other names like that

	<i>Once or twice</i>	<i>3-5 times</i>	<i>6-10 times</i>	<i>> 10 times</i>	<i>Not in past year</i>	<i>Never</i>	<i>N/A</i>
Responding parent/ adult carer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other parent/adult carer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q30. Pinched him/her

	<i>Once or twice</i>	<i>3-5 times</i>	<i>6-10 times</i>	<i>> 10 times</i>	<i>Not in past year</i>	<i>Never</i>	<i>N/A</i>
Responding parent/adult carer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other parent/adult carer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q32. Refused to speak to him/her

	<i>Once or twice</i>	<i>3-5 times</i>	<i>6-10 times</i>	<i>> 10 times</i>	<i>Not in past year</i>	<i>Never</i>	<i>N/A</i>
Responding parent/adult carer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other parent/adult carer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q33. Withheld a meal as punishment

	<i>Once or twice</i>	<i>3-5 times</i>	<i>6-10 times</i>	<i>> 10 times</i>	<i>Not in past year</i>	<i>Never</i>	<i>N/A</i>
Responding parent/adult carer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other parent/adult carer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q34. Used a hand or pillow to prevent breathing (smother)

	<i>Once or twice</i>	<i>3-5 times</i>	<i>6-10 times</i>	<i>> 10 times</i>	<i>Not in past year</i>	<i>Never</i>	<i>N/A</i>
Responding parent/adult carer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other parent/adult carer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q35. Burned, scalded or branded him/her

	<i>Once or twice</i>	<i>3-5 times</i>	<i>6-10 times</i>	<i>> 10 times</i>	<i>Not in past year</i>	<i>Never</i>	<i>N/A</i>
Responding parent/adult carer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other parent/adult carer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q36. Hit him or her over and over again with object or fist ("beat-up")

	<i>Once or twice</i>	<i>3-5 times</i>	<i>6-10 times</i>	<i>> 10 times</i>	<i>Not in past year</i>	<i>Never</i>	<i>N/A</i>
Responding parent/adult carer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other parent/adult carer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q37. Threatened him/her with a knife or gun

	<i>Once or twice</i>	<i>3-5 times</i>	<i>6-10 times</i>	<i>> 10 times</i>	<i>Not in past year</i>	<i>Never</i>	<i>N/A</i>
Responding parent/adult carer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other parent/adult carer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q38. Locked him or her in a dark room

	<i>Once or twice</i>	<i>3-5 times</i>	<i>6-10 times</i>	<i>> 10 times</i>	<i>Not in past year</i>	<i>Never</i>	<i>N/A</i>
Responding parent/adult carer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other parent/adult carer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q39. Used public humiliation to discipline him or her

	<i>Once or twice</i>	<i>3-5 times</i>	<i>6-10 times</i>	<i>> 10 times</i>	<i>Not in past year</i>	<i>Never</i>	<i>N/A</i>
Responding parent/ adult carer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other parent/adult carer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Section C – Neglect and sexual abuse questions

Q40. Was there a time in the past year that your child didn't get the medical care for an injury or illness that he or she needed at that time?

☐ No (Go to question 41) ☐ Yes

If yes, explain why?

Q41. Was there a time in the last year that your child didn't get the food or liquid that he or she needed?

☐ No (Go to question 42) ☐ Yes

If yes, explain why?

Q42. Was there a time, in the past year that your child was seriously hurt or injured (cuts, broken bones or worse) when you or another adult should have been supervising him or her and weren't?

☐ No (Go to question 43)

☐ Yes

Q43. Was there a time in the last year that your child was touched in a sexual way by an adult?

☐ No (Go to question 44)

☐ Yes

Q44. Was there a time in the last year that your child had sexual intercourse with an adult?

☐ No (Go to question 45)

☐ Yes

Q45. What methods of discipline have you found to be most successful in changing your child's behavior?

S.1 Please mark which objects do you have at home?

	yes	no
TV	1	2
Refrigerator	1	2
Mobile phone	1	2
DVD	1	2
computer	1	2
furniture	1	2
Car	1	2
Washing machine	1	2

S.2 Did you celebrate child's birthday with a party last year?

1. Yes

2. No

S.2.a If yes where did child have a birthday party?

1. At home

2. In the Birthday center

3. In the restaurant

4. Other _____

S.2.b. Who was invited on your birthday party?

1. All school mates
2. Some school mates
3. Friends
4. Relative children
5. Children from neighborhood
6. Parent's friends
7. Parent's friend's children
8. Others _____

S.3. Did you have a holiday last one year?

1. Yes
2. No

S.3.a. Where did you spend a holiday?

1. In the village
2. In the country cottage
3. At the health resort

S.3.b Where did you live?

1. In a house
2. With relatives
3. In the rent house
4. In the hotel
5. Other _____

Thank you very much for helping with this research by sharing your parenting experience. If this questionnaire raised difficult or upsetting issues we encourage you to call _____ (local parenting or child care resource) for information or help. If you have questions about this survey, please feel free to contact the investigator _____ by calling _____

H1. Place of selection _____

Annex 9:

ISPCAN Child Abuse Screening Tool

Children's Version (ICAST-CH)

Children in many parts of the world have been exposed to violence or bad treatment by family members, at school, in their communities, or at work. This is an important problem for children in all parts of the world. We would like to ask you about your experiences with violence directed against you.

Gender Girl ☐ Boy ☐

1. How many years old are you _____ years old
2. In which school do you study?
3. Including this year, how many years have you attended school? _____ years
4. Do you live with your parents?
Mother: Yes ☐ No ☐ Father: Yes ☐ No ☐
5. Who else do you live with? (check all that apply)
Grandfather ☐ Grandmother ☐ Sister(s) ☐ Brother(s) ☐
Other relative(s) ☐ People who are not relatives ☐
6. Do you belong to any religion or religious group? Yes ☐ No ☐
7. What religion or religious group do you belong to?
(List choices from country)
8. What ethnical group is your family a part of?

S.1 Please check which objects do you have at home?

	yes	no
TV	1	2
Refrigerator	1	2
Mobile phone	1	2
DVD	1	2
computer	1	2
furniture	1	2
Car	1	2
Washing machine	1	2

S.2 Did you celebrate your birthday with a party last year?

1. Yes
2. No

S.2.a If yes where did you have a birthday party?

1. At home
2. In the Birthday center
3. In the restaurant
4. Other -----

s.2.b. Who was invited on you birthday party?

1. All class mates.
2. Some class mates.
3. Friends.
4. Relative children.
5. Children from neighborhood.
6. Parent's friends.
7. Children of your Parents' friends.
8. Others.

S.3. Did you have a holiday last year?

1. Yes
2. No

S.3.a. Where did you spend a holiday?

1. In the village.
2. In the country cottage.
3. At the health resort.

S.3.b Where did you stay for the holiday?

1. in our own house.
2. with relatives.
3. in a rent house.
4. in a hotel.
5. other _____

Part A: Children's Experiences in the Home

We want to find out about experiences that happen to children **at home / inside the family**.

This questionnaire is being used with children in many parts of the world to ask children about experiences that they might have had so that people can know what things they have to pay attention to keep children safe.

We want to find out about the things that adults sometimes do to children and adolescents that may hurt or make them feel uncomfortable, upset or scared in their school. We want to ask you about things that have happened to you **in the past year**.

These questions may seem strange or hard to answer. Please try to answer them as best you can, thinking about the past year. This is not a test. There is not right or wrong answer, just say what you remember happened to you. If at any point you feel too uncomfortable to continue you can stop.

If you want to get help about any of the things we ask about, talk to the person who gave this questionnaire to you. Unless you tell us you want to talk, no one will ever know that the answers that you give are about you

Sometimes, when children and adolescents are growing up, they see people (like natural parents/ stepparents/ adoptive parents/ caregivers/older brother /aunts and uncles or sisters /cousins), behaving in or near their home in ways that make them feel uncomfortable or even frightened. In the past year

D11. Has anyone in your home used drugs and/or alcohol and then behaved in a way that frightened you?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

D11. a) Would you like to say more?

D12. Have you seen adults in your home shouting and yelling at each other (arguing) in a way that frightened you?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

D12. a) Would you like to say more?

D13. Have you seen adults in your home hit, punch each other or hurt each other physically in other ways?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

D13. a) Would you like to say more?

D14. Have you seen anyone in your home used knives, guns, stick, rocks or other things to hurt or scare someone else inside home?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

D14. a) Would you like to say more?

There might be other frightening things going on near your home. In the past year

D15. Has anyone close to you, family, friend or neighbour been killed by someone in real life (not on the TV, video or film) on purpose near your home?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

D15. a) Would you like to say more?

D16. Have you lived somewhere where you have seen people being shot, bombs going off, people fighting, or rioting?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

D16. a) Would you like to say more?

D17. Has anyone come into your home and stolen something?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

D17. a) Would you like to say more?

Sometimes, when children and adolescents are growing up, people say or do things to make the child or adolescent feel embarrassed, ashamed or bad. In the past year, has anyone in your family and living in your home (for example natural parents/ grandparents/ step parents/ adoptive parents/ caregivers/ aunts and uncles/ or brothers, sisters or cousins)

D18. Screamed at you very loud and aggressively?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

D18.a. If this happened, was it by

☐ Adult ☐ Another child or adolescent ☐ Both

D18.b. Would you like to say more?

D19. Called you names, said mean things or cursed you?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

D19.a. If this happened, was it by

☐ Adult ☐ Another child or adolescent ☐ Both

D19.b. Please describe:

D20. Made you feel ashamed/embarrassed in front of other people in a way you will always feel bad about?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

D20.a. If this happened, was it by an:

☐ Adult ☐ Another child or adolescent ☐ Both

D20.b. Would you like to say more?

D21. Said that they wished you were dead/ had never been born?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

D21.a. If this ever happened, was it by an:

☐ Adult ☐ Another child or adolescent ☐ Both

D21.b. Would you like to say more?

D22. Threatened to leave you forever or abandon you?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

D22.a. If this ever happened, was it by an:

☐ Adult ☐ Another child or adolescent ☐ Both

D22.b. Would you like to say more?

D23. Locked you out of the home for a long time?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

D23.a. If this ever happened, was it by

☐ Adult ☐ Another child or adolescent ☐ Both

D23.b. Would you like to say more?

D24. Threatened to hurt or kill you, including invoking evil spirits against you?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

D24.a. If this ever happened, was it by

☐ Adult ☐ Another child or adolescent ☐ Both

D24.b. Would you like to say more?

Sometimes even children or young people who are your age and who live at home can also be very unkind and make you feel ashamed, embarrassed or generally bad about yourself. In the past year

D25. Have you been bullied (teased, embarrassed) so that you feel sad or bad, by another child at home?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

D25.a. Would you like to say more?

Sometimes, when children are growing up, people who are responsible for caring for them (for example parents/stepparents/adoptive parents/other carers/aunts and uncles) do not know how to care for children properly, and the children do not get what they need to grow up healthy. Have any of these things happened to you in the past year?

D26. Do you feel that you did not get enough to eat (went hungry) and/or drink (were thirsty) even though there was enough for everyone?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

D26.a. Would you like to say more?

D27. Have to wear dirty, torn clothes, or clothes that were not warm enough/too warm, shoes that were too small even though there were ways of getting better/new ones?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

D27.a. Would you like to say more?

D28. Not taken care of when you were sick - for example not taken to see a doctor when you were hurt or not given the medicines you needed?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

D28.a. Would you like to say more?

D29. You did not feel cared for?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

D29.a. Would you like to say more?

D30. Felt that you were not important?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

D30.a. Would you like to say more?

D31. Felt that there was never anyone looking after you, supporting you, helping you when you most needed it.?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

D31.a. Would you like to say more?

Sometimes people that live in the same home as children and adolescents can hurt them physically. Thinking about yourself, in the past year, has anyone in your home (for example natural parents/ grandparents/ stepparents/adoptive parents/ caregivers/aunts and uncles/ older brother or sisters or cousins) done something such as:

D32. Pushed, Grabbed, or Kicked you?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

D32.a. If this happened, was it by an

☐ adult? ☐ another child or adolescent? ☐ both?

D32.b. Would you like to say more?

D33. Hit, beat, or spanked you with a hand?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

D33.a. If this happened, was it by an

☐ adult? ☐ another child or adolescent? ☐ both?

D33.b. Would you like to say more?

D34. Hit, beat, or spanked you with a belt, a stick or other object?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

D34.a. If this happened, was it by an

☐ adult? ☐ another child or adolescent? ☐ both?

D34.b. Would you like to say more?

D35. Choked you or tried to drown you?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

D35.a. If this happened, was it by an

☐ adult? ☐ another child or adolescent? ☐ both?

D35.b. Would you like to say more?

D36. Burned or scalded you, (including putting the pepper in your mouth)?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

D36.a. If this happened, was it by an

☐ adult? ☐ another child or adolescent? ☐ both?

D36.b. Would you like to say more?

D37. Locked you up in a small place, tied you up, or chained you to something?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

D37.a. If this happened, was it by an

☐ adult? ☐ another child or adolescent? ☐ both?

D37.b. Would you like to say more?

D38. Pulled your hair, pinched you, or twisted your ear?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

D38.a. If this happened, was it by an

☐ adult? ☐ another child or adolescent? ☐ both?

D38.b. Would you like to say more?

D39. Making you stay in one position holding a heavy load or another burden or making you do exercise as punishment?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

D39.a. If this ever happened, was it by an

☐ adult? ☐ another child or adolescent? ☐ both?

D39.b. Would you like to say more?

D40. Threatened you with a knife or a gun

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

D40.a. If this ever happened, was it by

☐ adult? ☐ another child or adolescent? ☐ both?

D40.b. Would you like to say more?

Sometimes adults do sexual things to children or show sexual things to children and adolescents. Thinking about yourself, have anyone (for example parents/ stepparents /adoptive parents/ caregivers/ aunts or uncles /older brother or sisters or cousins) done any of these things to you in the past year?

D41. Made you upset by speaking to you in a sexual way or writing sexual things about you?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

D41.a. If this ever happened, was it by an

☐ adult? ☐ another child or adolescent? ☐ both?

D41.b. How well did you know the person?

☐ Not at all ☐ Not very well ☐ Very well

D41.c. Would you like to say more?

D42. Made you watch a sex video or look at sexual pictures in a magazine or computer when you did not want to?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

D42.a. If this happened, was it by an

☐ adult? ☐ another child or adolescent? ☐ both?

D42.b. How well did you know the person?

☐ Not at all ☐ Not very well ☐ Very well

D42.c. Would you like to say more?

D43. Made you look at their private parts or wanted to look at yours?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

D43.a. If this happened, was it by an

☐ adult? ☐ another child or adolescent? ☐ both?

D43.b. How well did you know the person?

☐ Not at all ☐ Not very well ☐ Very well

D43.c. Would you like to say more?

D44. Touched your private parts, or made you touch theirs?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

D44.a. If this happened, was it by an

☐ adult? ☐ another child or adolescent? ☐ both?

D44.b. How well did you know the person?

☐ Not at all ☐ Not very well ☐ Very well

D44.c. Would you like to say more?

D45. Made a sex video of you alone or with other people doing sexual things?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

D45.a. If this happened, was it by an

☐ adult? ☐ another child or adolescent? ☐ both?

D45.b. How well did you know the person?

☐ Not at all ☐ Not very well ☐ Very well

D45.c. Would you like to say more?

D46. Tried to have sex with you when you did not want them to?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

D46.a. If this happened, was it by an

☐ adult? ☐ another child or adolescent? ☐ both?

D46.b. How well did you know the person?

☐ Not at all ☐ Not very well ☐ Very well

D46.c. Would you like to say more?

D47. Do you have any other experiences with being hurt at Home that we have not already asked you about?

K10.CI. Do you feel safe at school you go to?

☐ Always ☐ Usually ☐ Sometimes ☐ Never

K10 a.CI. Do you like to go to school?

☐ Always ☐ Usually ☐ Sometimes ☐ Never

We would like to know the incidents, which children have experienced at school. We want to ask you what has happened in your school in the past year. Sometimes people at school can physically hurt children or adolescents. Has anyone done any of these things to you in the past year?

K11.CI Hurt you or caused pain to you at school?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

K11.a. CI. If this ever happened, was it by

☐ adult? ☐ another child or adolescent? ☐ both?

K11.b. CI. Would you like to say more?

K29.CI Tried to cut you purposefully with a sharp object?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

K29.a CI If this ever happened, was it by

☐ adult? ☐ another child or adolescent? ☐ both?

K29.b.CI Would you like to say more?

***Sometimes, when children and adolescents are at school people say or do things to make them feel embarrassed, ashamed or bad.
In the past year has anyone at school:***

K33.CI Called you rude or hurtful names?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

K33.a CI If this ever happened, was it by

☐ adult? ☐ another child or adolescent? ☐ both?

K33.b.CI Would you like to say more?

K37.CI Stopped you from being with other children to make you feel bad or lonely?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

K37.a CI If this ever happened, was it by

☐ adult? ☐ another child or adolescent? ☐ both?

K37.b.CI Would you like to say more?

Sometimes adults, children and adolescents at school do sexual things or show sexual things to children and adolescents. Thinking about yourself, has anyone done any of these things to you in the past year?

K42. CI Touched your body in a sexual way or in a way that made you uncomfortable? By “sexual way” we mean touching you on your genitals or breasts.

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

K42.a CI If this ever happened, was it by

☐ adult? ☐ another child or adolescent? ☐ both?

K42.b.CI How well did you know the person?

☐ Not at all ☐ Not very well ☐ Very well

K42.c.CI Would you like to say more?

K48. Do you have any suggestions for preventing violence against children?

K49. Was this a hard questionnaire to answer?

☐ Yes ☐ No

K50. Is there anything that you didn't understand?

☐ Yes ☐ No

K51. Was it difficult to be completely open about what happened to you?

☐ Yes ☐ No

K52. Is there anything else you would like to say about what happened to you or about filling in the questionnaire?

H1. Place of the selection:

Thank you for your help

Annex 10:

ICAST Survey of Children's Exposure to Violence in Institutions

Please tell us about yourself

Children in many parts of the world have been exposed to violence or bad treatment by at school, in their communities, or at work. This is an important problem for children in all parts of the world. We would like to ask you about your experiences with violence directed against you.

- D1. Gender Girl ☐ Boy ☐
- D2. How many years old are you? _____ years old
- D3. In wich school do you study?
- D4. Including this year, how many years have you attended school? _____ years
- D5. Do you live with your parents? Mother: Yes ☐ No ☐ Father: Yes ☐ No ☐
- D6. Who else do you live with? (check all that apply)
- Grandfather ☐ Grandmother ☐ Sister(s) ☐ Brother(s) ☐
- Other relative(s) ☐ People who are not relatives ☐
- D7. Do you belong to any religion or religious group? Yes ☐ No ☐
- D8. What religion or religious group do you belong to?
- D9. What ethnical group is your family a part of?

Questions about Institutions

We want to find out about experiences that happen to children in institutions where they stay or are away from the family. This questionnaire is being used with children in many parts of the world to ask children about experiences that they might have had so that people can know what things they have to pay attention to keep children safe.

We want to find out about the things that adults sometimes do to children and adolescents that may hurt or make them feel uncomfortable, upset or scared. We want to ask you about things that have happened to you in the past year.

These questions may seem strange or hard to answer, but try and answer them as best you can, thinking back over the past year. This is not a test. There is not right or wrong answer, just say what you remember happened to you.. If at any point you feel too uncomfortable to continue you can stop.

If you want to get help about any of the things we ask about, talk to the person who gave this questionnaire to you. Unless you tell us you want to talk, no one will ever know that the answers that you give are about you

D10. Do you feel safe in the institution you live?

☐ Always ☐ Usually ☐ Sometimes ☐ Never

D10.a. Do you like to live in the institution?

☐ Always ☐ Usually ☐ Sometimes ☐ Never

Sometimes, in the institutions where children and adolescents live without their families, people can hurt them physically. Thinking about yourself, in the institution where you live without family has anyone done something like in the last year?

D11. Hurt you or caused pain to you?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

D11.a If this ever happened, was it by

☐ adult? ☐ another child or adolescent? ☐ both?

D11.b. Would you like to say more?

D12. Slapped you with a hand on your face or head as punishment?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

D12.a If this ever happened, was it by

☐ adult? ☐ another child or adolescent? ☐ both?

D12.b. Would you like to say more?

D13. Slapped you with a hand on your arm or hand?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

D13.a If this ever happened, was it by

☐ adult? ☐ another child or adolescent? ☐ both?

D13.b Would you like to say more?

D14. Twisted your ear as punishment?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

D14.a If this ever happened, was it by

☐ adult? ☐ another child or adolescent? ☐ both?

D14.b Would you like to say more?

D15. Pulled your hair as punishment?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

D15.a If this ever happened, was it by

☐ adult? ☐ another child or adolescent? ☐ both?

D15.b Would you like to say more?

D16. Hit you by throwing an object at you?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

D16.a If this ever happened, was it by

☐ adult? ☐ another child or adolescent? ☐ both?

D16.b Would you like to say more?

D17. Hit you with a closed fist?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

D17.a If this ever happened, was it by

☐ adult? ☐ another child or adolescent? ☐ both?

D17.b Would you like to say more?

D18. Kicked you?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

D18.a If this ever happened, was it by

☐ adult? ☐ another child or adolescent? ☐ both?

D18.b Would you like to say more?

D19. Crushed your fingers or hands as punishment?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

D19.a If this ever happened, was it by

☐ adult? ☐ another child or adolescent? ☐ both?

D19.b Would you like to say more?

D20. Washed your mouth with something like soap or put the pepper in your mouth?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

D20.a If this ever happened, was it by

☐ adult? ☐ another child or adolescent? ☐ both?

D20.b Would you like to say more?

D21. Made you stand /kneel in a way that hurts to punish you?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

D21.a If this ever happened, was it by

☐ adult? ☐ another child or adolescent? ☐ both?

D21.b Would you like to say more?

D22. Made you stay outside in the cold or heat to punish you?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

D22.a If this ever happened, was it by

☐ adult? ☐ another child or adolescent? ☐ both?

D22.b Would you like to say more?

D23. Burnt you as punishment?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

D23.a If this ever happened, was it by

☐ adult? ☐ another child or adolescent? ☐ both?

D23.b Would you like to say more?

D24. Put you into hot or cold water as punishment?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

D24.a If this ever happened, was it by

☐ adult? ☐ another child or adolescent? ☐ both?

D24.b Would you like to say more?

D25. Took your food away from you as punishment?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

D25.a If this ever happened, was it by

☐ adult? ☐ another child or adolescent? ☐ both?

D25.b Would you like to say more?

D26. Forced you to do something that was dangerous?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

D26.a If this ever happened, was it by

☐ adult? ☐ another child or adolescent? ☐ both?

D26.b Would you like to say more?

D27. Choked you?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

D27.a If this ever happened, was it by

☐ adult? ☐ another child or adolescent? ☐ both?

D27.b Would you like to say more?

D28. Tied you up with a rope or belt?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

D28.a If this ever happened, was it by

☐ adult? ☐ another child or adolescent? ☐ both?

D28.b Would you like to say more?

D29. Tried to cut you purposefully with a sharp object?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

D29.a If this ever happened, was it by

☐ adult? ☐ another child or adolescent? ☐ both?

D29.b Would you like to say more?

Sometimes, when children are growing up, people who are responsible for caring for them do not know how to care for children properly, and the children do not get what they need to grow up healthy. In the institution where you live without family, have any of these things happened to you, in the past year?

k26. CH. Do you feel that you did not get enough to eat (went hungry) and/or drink (were thirsty)?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

k26.1 Would you like to say more?

k27.CH. Have to wear dirty, torn clothes, or clothes that were not warm enough/too warm, shoes that were too small even though there were ways of getting better/new ones?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

k27.1 Would you like to say more?

k28. CH. Not taken care of when you were sick - for example not taken to see a doctor when you were hurt or not given the medicines you needed?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

k28.1 Would you like to say more? ?

k29. CH. You did not feel cared for?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

k29.1 Would you like to say more?

k30.CH. Felt that you were not important?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

k30.1. Would you like to say more?

k31. CH. Felt that there was never anyone looking after you, supporting you, helping you when you most needed it.?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

k31.1 Would you like to say more?

Sometimes, when children and adolescents are in the institutions people say or do things to make them feel embarrassed, ashamed or bad. In the past year in the institution where you live without family has anyone

P30. Sworn at you?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

P30.a If this ever happened, was it by

☐ adult? ☐ another child or adolescent? ☐ both?

P30.b Would you like to say more?

D31. Deliberately insulted you?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

D31.a If this ever happened, was it by

☐ adult? ☐ another child or adolescent? ☐ both?

D31.b Would you like to say more?

D32. Shouted at you to embarrass or humiliate you?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

D32.a If this ever happened, was it by

☐ adult? ☐ another child or adolescent? ☐ both?

D32.b Would you like to say more?

D33. Called you rude or hurtful names?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

D33.a If this ever happened, was it by

☐ adult? ☐ another child or adolescent? ☐ both?

D33.b Would you like to say more?

D34. Purposely made you feel stupid or foolish?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

D34.a If this ever happened, was it by

☐ adult? ☐ another child or adolescent? ☐ both?

D34.b Would you like to say more?

D35. Referred to your gender/ religion or culture in a hurtful way?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

D35.a If this ever happened, was it by

☐ adult? ☐ another child or adolescent? ☐ both?

D35.b Would you like to say more?

D36. Referred to any health problems you might have in a hurtful way?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

D36.a If this ever happened, was it by

☐ adult? ☐ another child or adolescent? ☐ both?

D36.b Would you like to say more?

D37. Stopped you from being with other children to make you feel bad or lonely?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

D37.a If this ever happened, was it by

☐ adult? ☐ another child or adolescent? ☐ both?

D37.b Would you like to say more?

D38. Tried to embarrass you because you were an orphan or without a parent?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

D38.a If this ever happened, was it by

☐ adult? ☐ another child or adolescent? ☐ both?

D38.b Would you like to say more?

D39. Embarrassed you because you were poor or unable to buy things?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

D39.a If this ever happened, was it by

☐ adult? ☐ another child or adolescent? ☐ both?

D29.b Would you like to say more?

D40. Stole or broke or ruined your belongings?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

D40.a If this ever happened, was it by

☐ adult? ☐ another child or adolescent? ☐ both?

D40.b Would you like to say more?

Sometimes adults or other children and adolescents do sexual things or show sexual things to children and adolescents. Thinking about yourself, in the institution where you live without family have anyone done any of these things to you in the past year?

D42. Touched your body in a sexual way or in a way that made you uncomfortable? By “sexual way” we mean touching you on your genitals or breasts.

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

D42.a If this ever happened, was it by

☐ adult? ☐ another child or adolescent? ☐ both?

D42.b. How well did you know the person?

☐ Not at all ☐ Not very well ☐ Very well

D42.c Would you like to say more?

D43. Showed you pictures, magazines, or movies of people or children doing sexual things?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

D43.a If this ever happened, was it by

☐ adult? ☐ another child or adolescent? ☐ both?

D43.b How well did you know the person?

☐ Not at all ☐ Not very well ☐ Very well

D43.c Would you like to say more?

D44. Made you take your clothes off when it was not for a medical reason?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

D44.a If this ever happened, was it by

☐ adult? ☐ another child or adolescent? ☐ both?

D44.b. How well did you know the person?

☐ Not at all ☐ Not very well ☐ Very well

D44.c Would you like to say more?

D45. Opened or took their own clothes off in front of you when they should not have done so?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

D45.a If this ever happened, was it by

☐ adult? ☐ another child or adolescent? ☐ both?

D45.b. How well did you know the person?

☐ Not at all ☐ Not very well ☐ Very well

D45.c Would you like to say more?

D46. In the institution you live did anyone make you have sex with them?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

D46.a If this ever happened, was it by

☐ adult? ☐ another child or adolescent? ☐ both?

D46.b. How well did you know the person?

☐ Not at all ☐ Not very well ☐ Very well

D46.c Would you like to say more?

D47. In the institution you live did anyone make you touch their private parts when you didn't want to?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

D47.a If this ever happened, was it by

☐ adult? ☐ another child or adolescent? ☐ both?

D47.b. How well did you know the person?

☐ Not at all ☐ Not very well ☐ Very well

D47.c Would you like to say more?

D48. In the institution you live did anyone touch your private parts or breasts when you didn't want them to?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

D48.a If this ever happened, was it by

☐ adult? ☐ another child or adolescent? ☐ both?

D48.b. How well did you know the person?

☐ Not at all ☐ Not very well ☐ Very well

D48.c Would you like to say more?

D49. In the institution you live did anyone give you money/ things to do sexual things?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

D49.a If this ever happened, was it by

☐ adult? ☐ another child or adolescent? ☐ both?

D49.b. How well did you know the person?

☐ Not at all ☐ Not very well ☐ Very well

D49.c Would you like to say more?

D50. In the institution you live did anyone involve you in making sexual pictures or videos?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

D50.a If this ever happened, was it by

☐ adult? ☐ another child or adolescent? ☐ both?

D50.b. How well did you know the person?

☐ Not at all ☐ Not very well ☐ Very well

D50.c Would you like to say more?

D51. In the institution you live did anyone kiss you when you didn't want to be kissed?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

D51.a If this ever happened, was it by

☐ adult? ☐ another child or adolescent? ☐ both?

D51.b. How well did you know the person?

☐ Not at all ☐ Not very well ☐ Very well

D51.c Would you like to say more?

D52. Do you think discipline in the institution you live is fair?

☐ Yes ☐ No

D53. In the institution you live do you have any other experiences with being hurt that we have not already asked you about?

b10.Cl. Do you feel safe at school you go to?

☐ Always ☐ Usually ☐ Sometimes ☐ Never

b10 a.Cl. Do you like to go to school?

☐ Always ☐ Usually ☐ Sometimes ☐ Never

We would like to know the incidents, which children have experienced at school. We want to ask you what has happened in your school in the past year. Sometimes people at school can physically hurt children or adolescents. Has anyone done any of these things to you in the past year?

b11.Cl Hurt you or caused pain to you at school?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

b11.a. Cl. If this ever happened, was it by

☐ adult? ☐ another child or adolescent? ☐ both?

b11.b. CI. Would you like to say more?

b29.CI Tried to cut you purposefully with a sharp object?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

b29.a CI If this ever happened, was it by

☐ adult? ☐ another child or adolescent? ☐ both?

b29.b Would you like to say more?

Sometimes, when children and adolescents are at school people say or do things to make them feel embarrassed, ashamed or bad.

In the past year has anyone at school:

b33.CI Called you rude or hurtful names?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

b33.a CI If this ever happened, was it by

☐ adult? ☐ another child or adolescent? ☐ both?

b33.b Would you like to say more?

b37.CI Stopped you from being with other children to make you feel bad or lonely?

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

b37.a CI If this ever happened, was it by

☐ adult? ☐ another child or adolescent? ☐ both?

b27.b Would you like to say more?

Sometimes adults, children and adolescents at school do sexual things or show sexual things to children and adolescents. Thinking about yourself, has anyone done any of these things to you in the past year?

b42. CI Touched your body in a sexual way or in a way that made you uncomfortable? By “sexual way” we mean touching you on your genitals or breasts.

☐ Many times ☐ Sometimes ☐ Never ☐ Not in the past year but this has happened

b42.a CI If this ever happened, was it by

☐ adult? ☐ another child or adolescent? ☐ both?

b42.b.CI How well did you know the person?

☐ Not at all ☐ Not very well ☐ Very well

b42.c Would you like to say more?

54. Do you have any suggestions for preventing violence against children:

55. *Was this a hard questionnaire to answer?*

☐ Yes ☐ No

56. Is there anything that you didn't understand?

☐ Yes ☐ No

57. *Was it difficult to be completely open about what happened to you?*

☐ Yes ☐ No

58. *Is there anything else you would like to say about what happened to you or about filling in the questionnaire?*

Thank you for your help. These questions are very important in helping children around the world keep safe. Many of the questions we asked can be upsetting to children or make them want to talk to someone about what might have happened. If you would like to talk more about what might have happened to you, please ask the person who gave you these questions to assist you in getting help.

H1. Place of selection: _____